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(54) **ROBOTICALLY-CONTROLLED SURGICAL INSTRUMENT WITH SELECTIVELY ARTICULATABLE END EFFECTOR**

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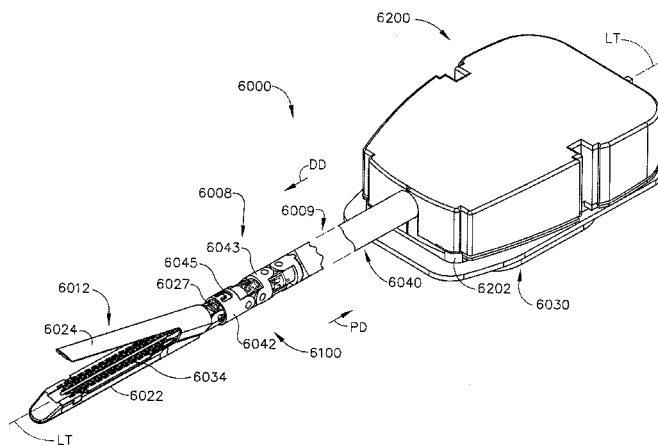
ABSTRACT

Devices and systems are provided for controlling movement of a working end of a surgical device by means of a robotic system. In one embodiment, systems and devices are provided for moving an end effector on a distal end of a surgical fastening device. Movement can include rotational movement of the end effector about an axis of the shaft, articulation of the end effector relative to the shaft, and actuation of an end effector, e.g., closing, firing, and/or cutting.

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FIG. 1A

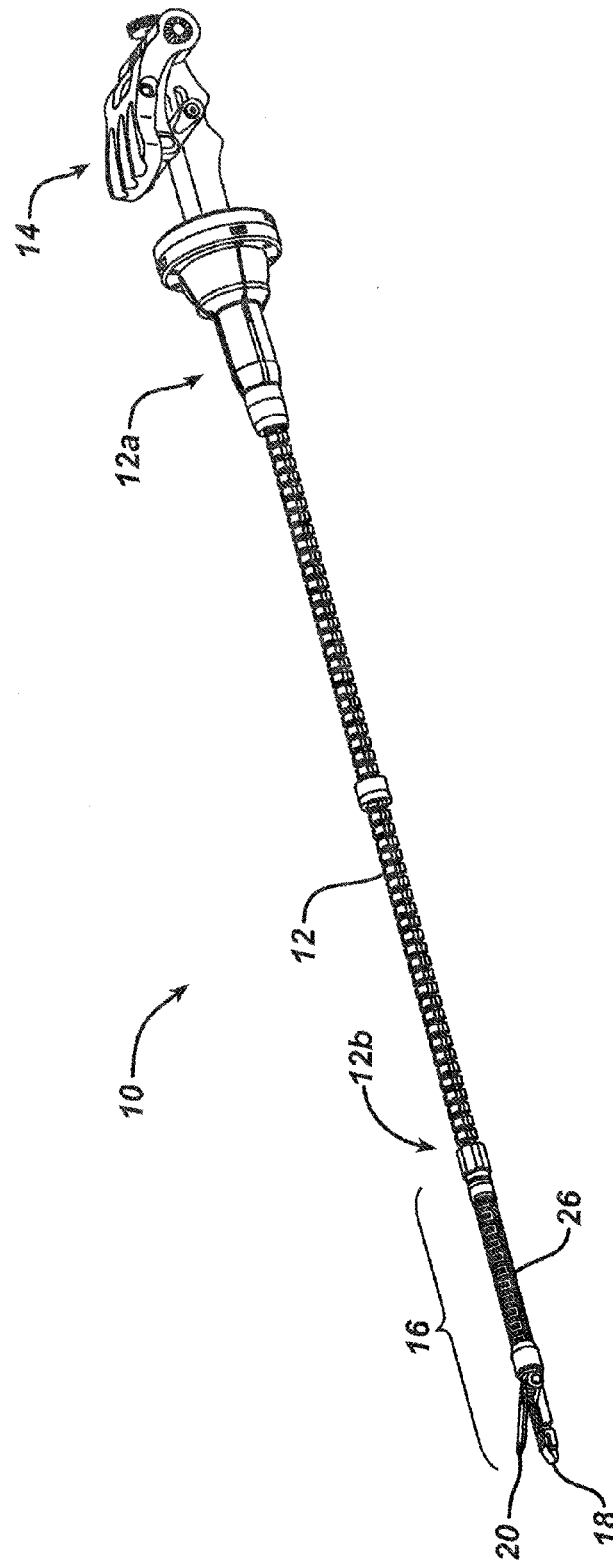


FIG. 1B

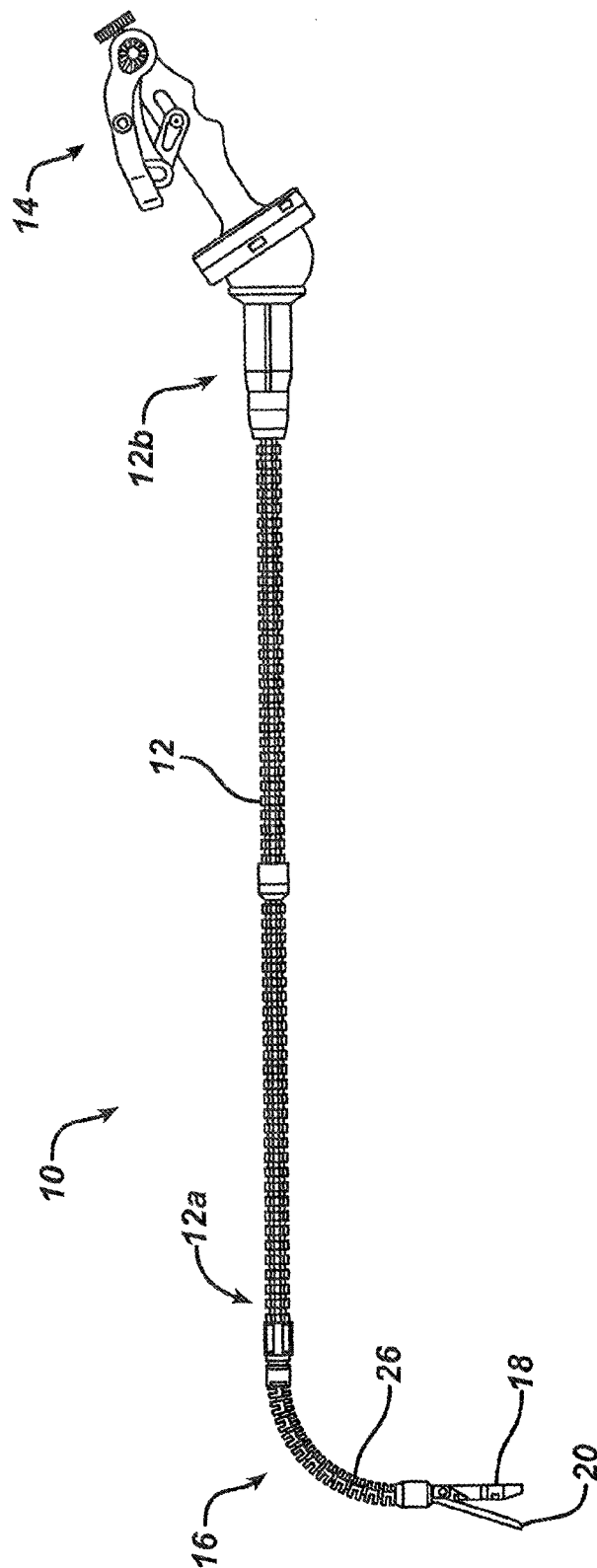
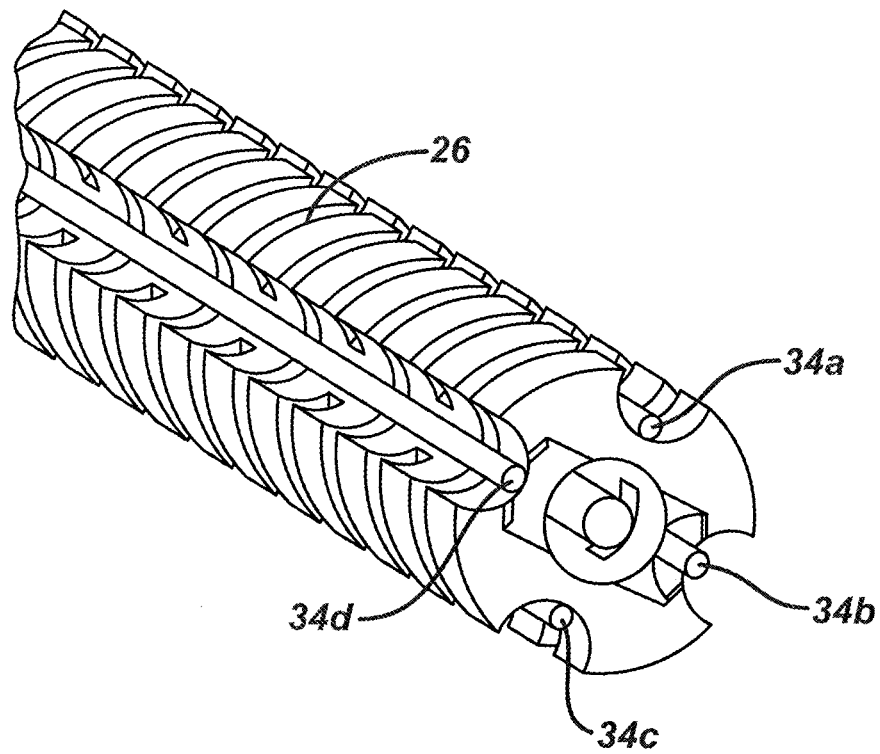
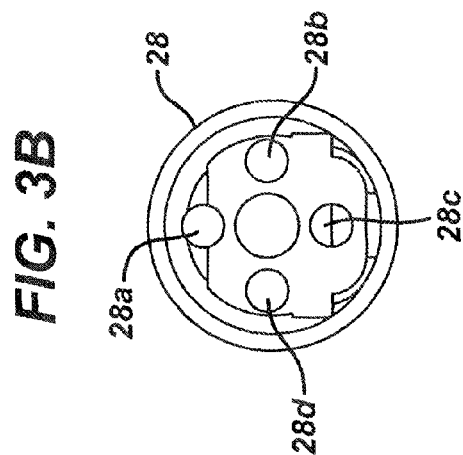
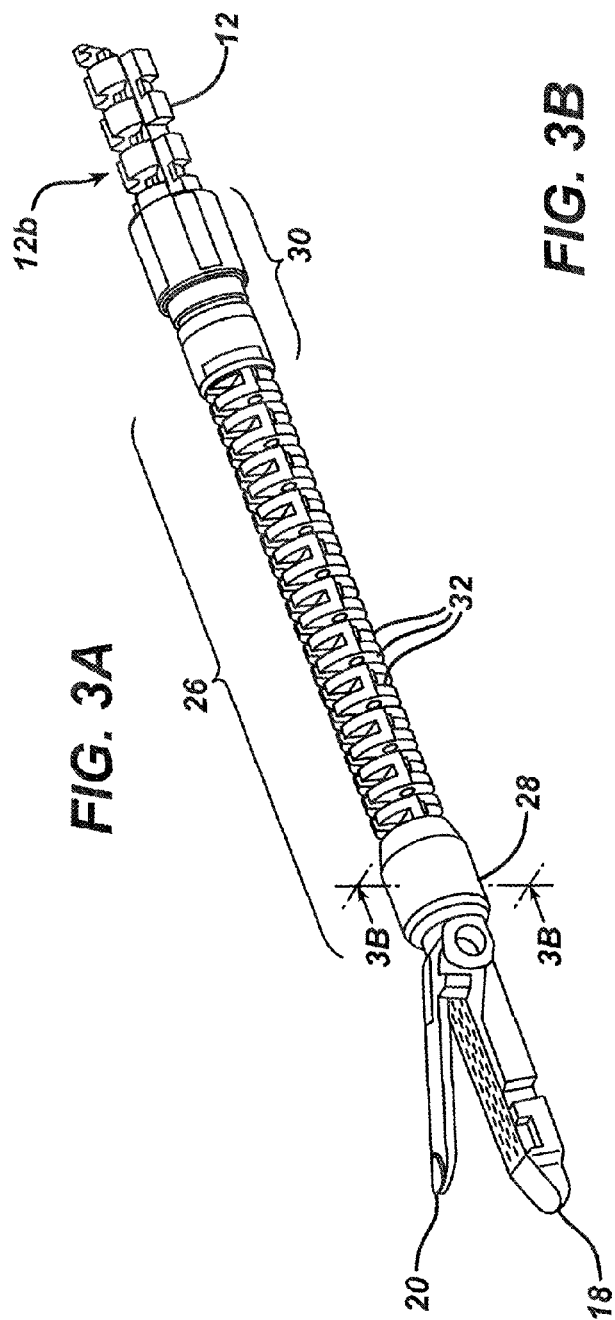


FIG. 2





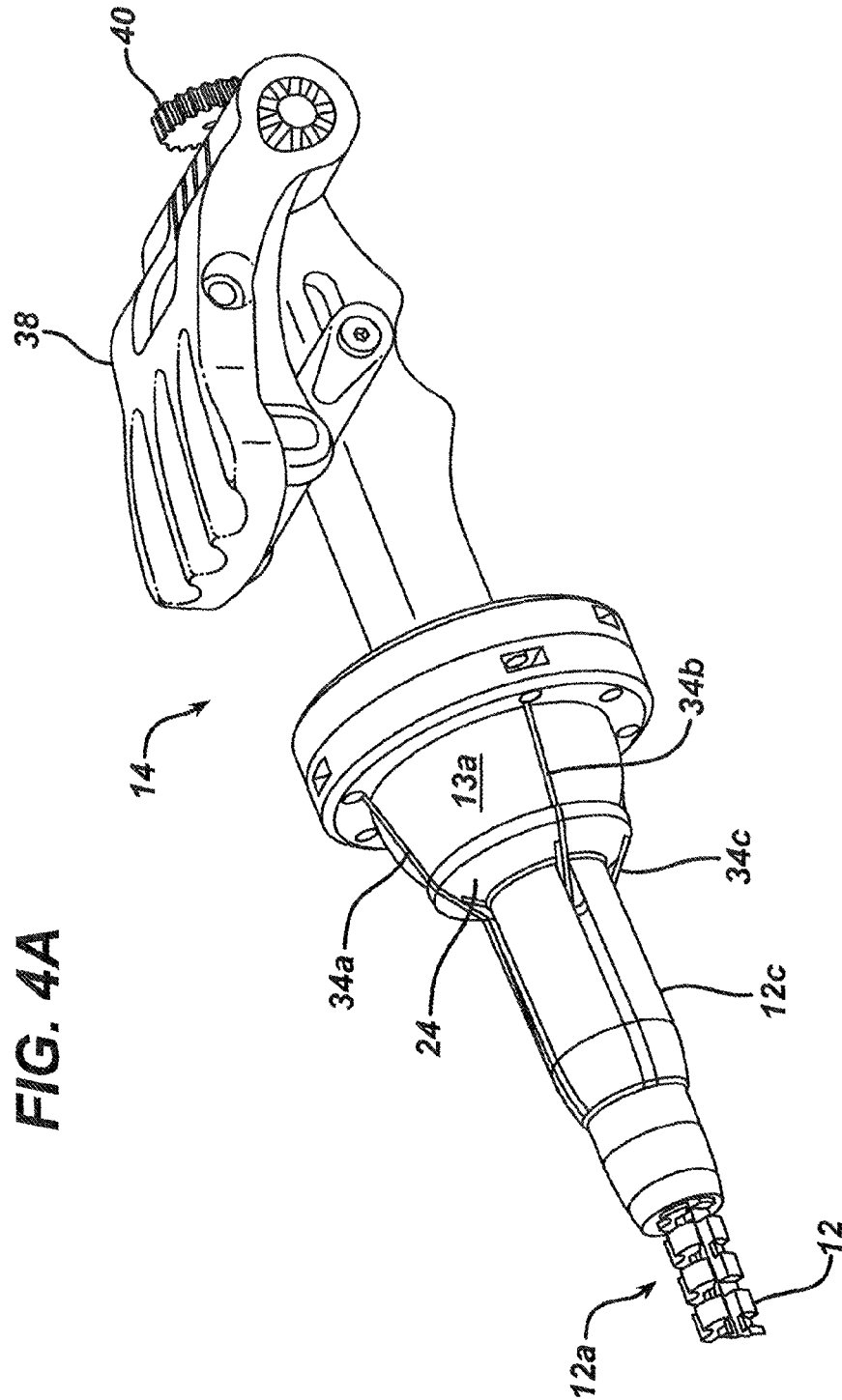


FIG. 4B

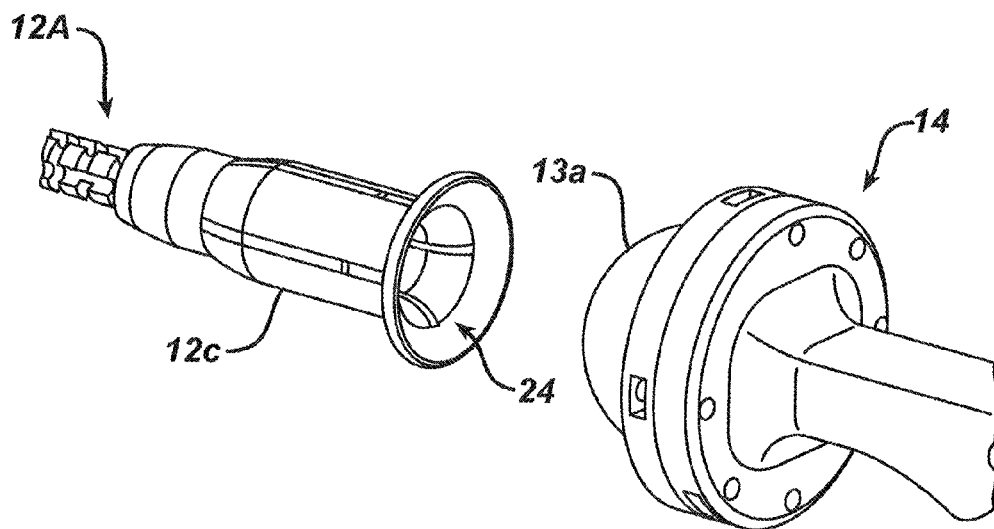


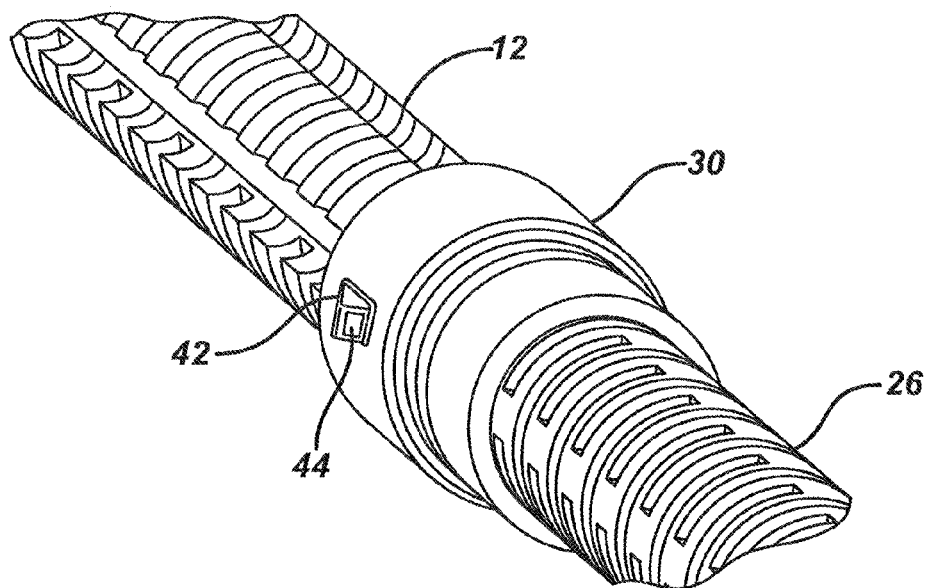
FIG. 5

FIG. 6

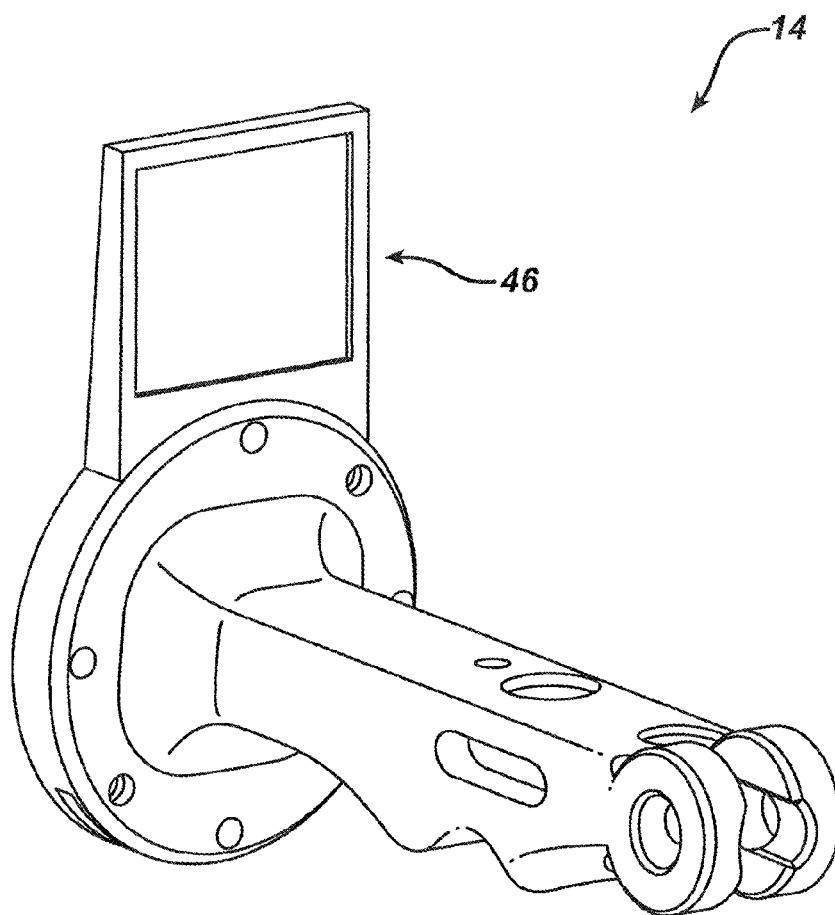


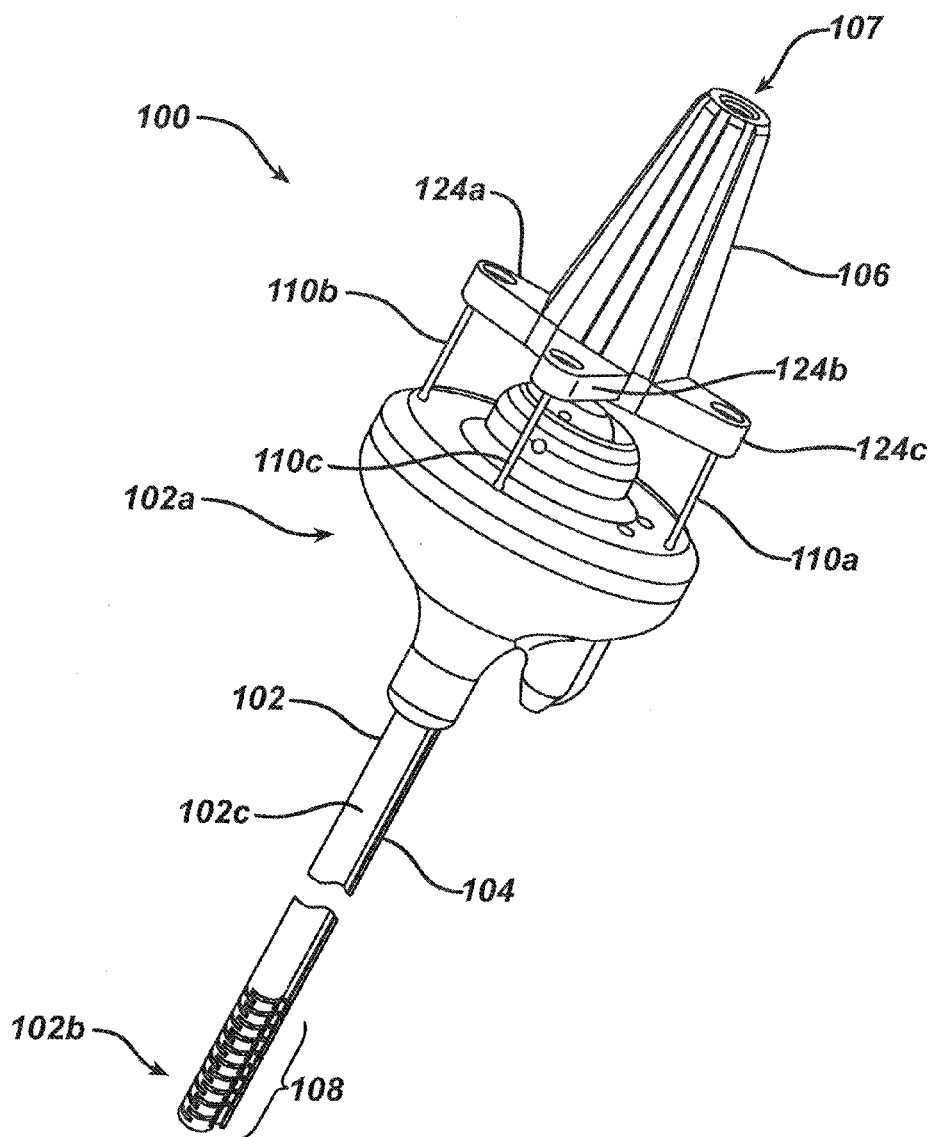
FIG. 7

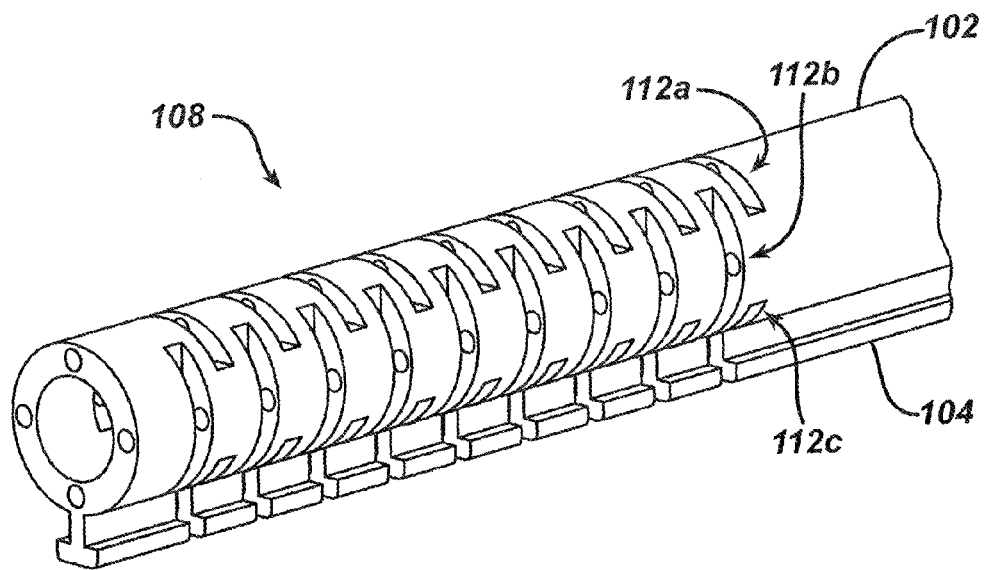
FIG. 8A

FIG. 8B

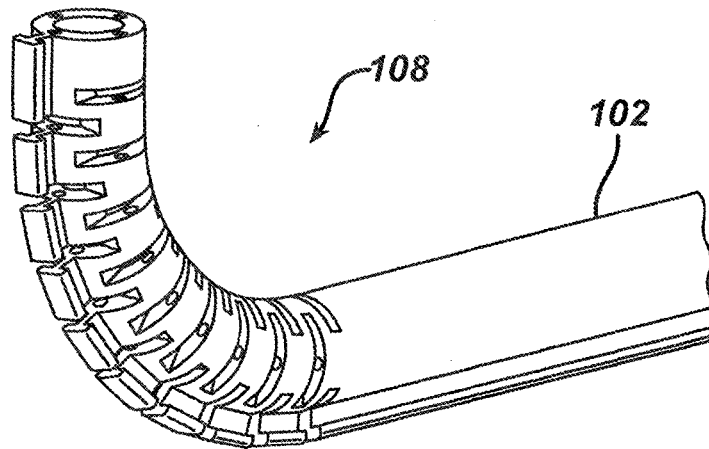


FIG. 8C

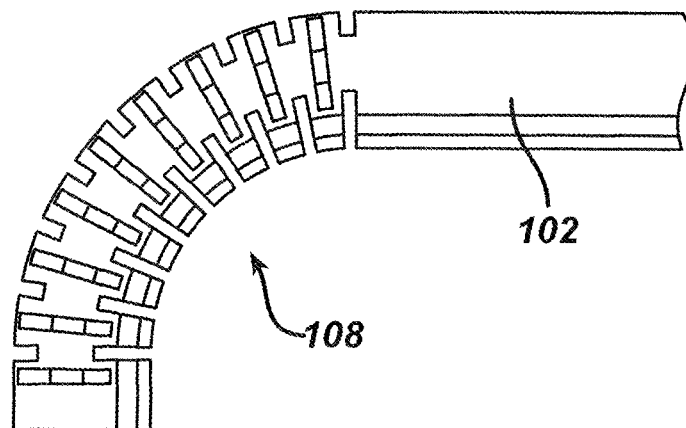


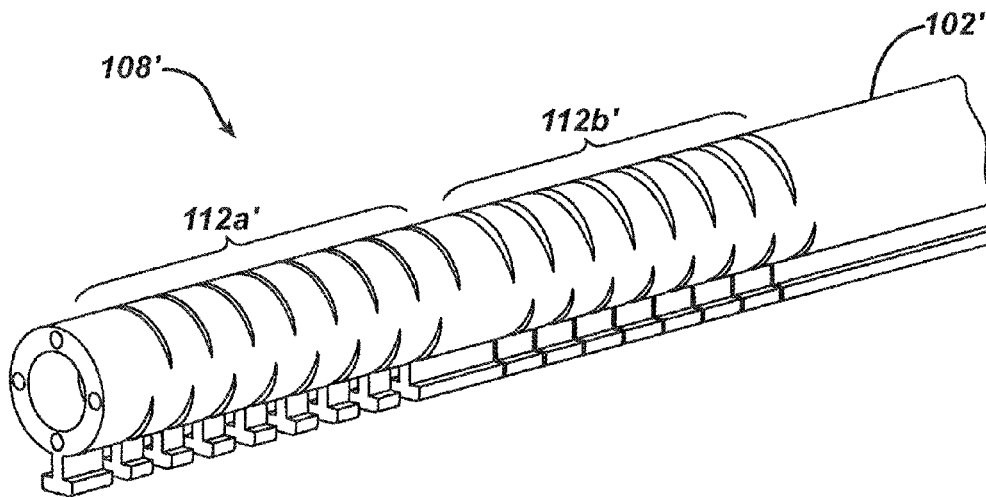
FIG. 9A

FIG. 9B

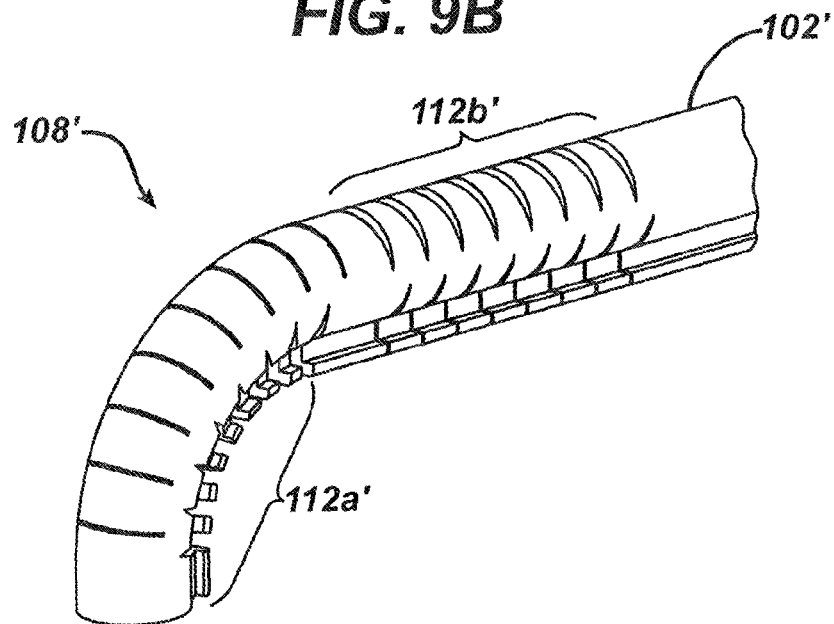
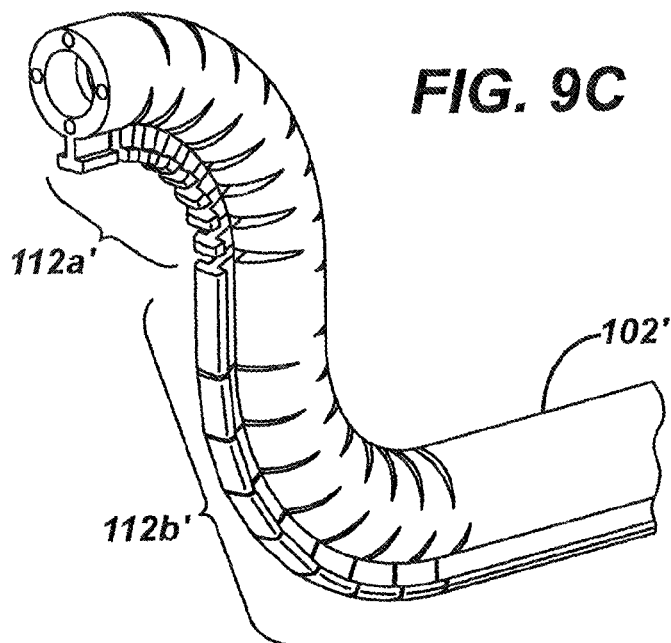


FIG. 9C



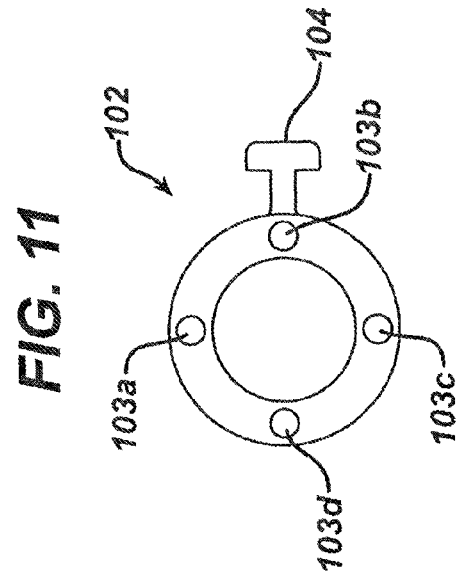
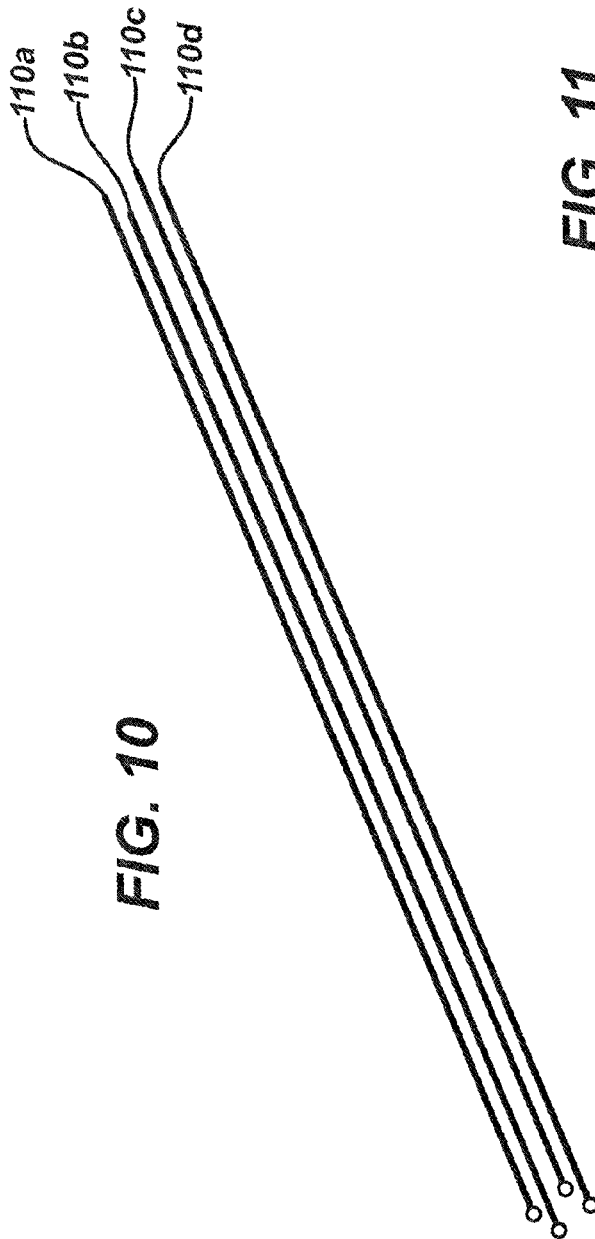


FIG. 12

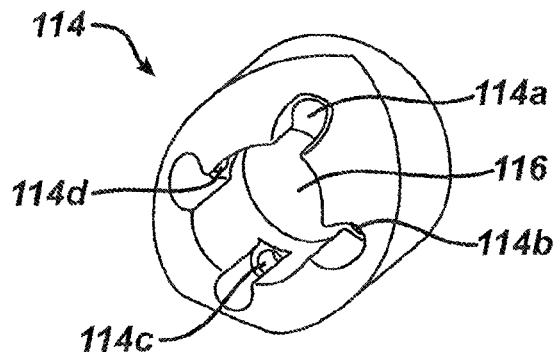


FIG. 13A

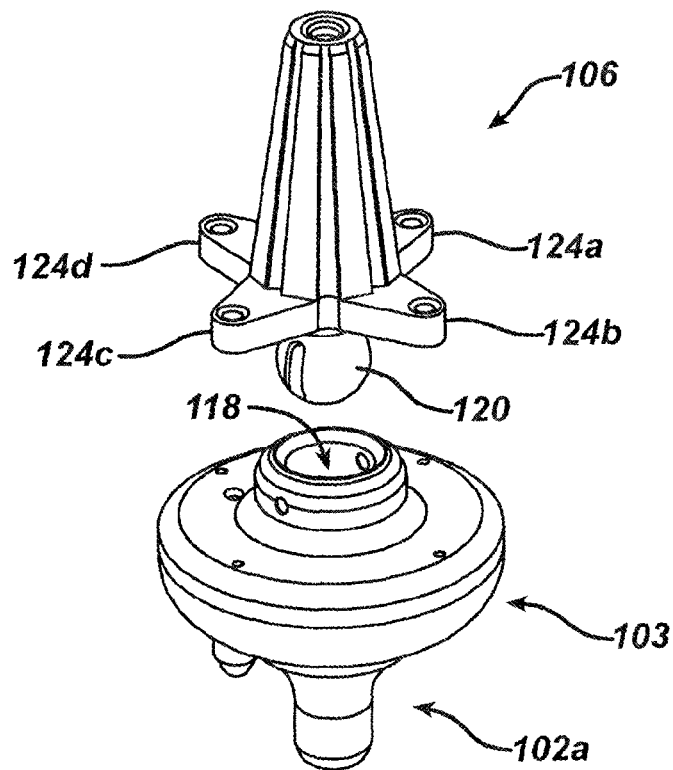


FIG. 13B

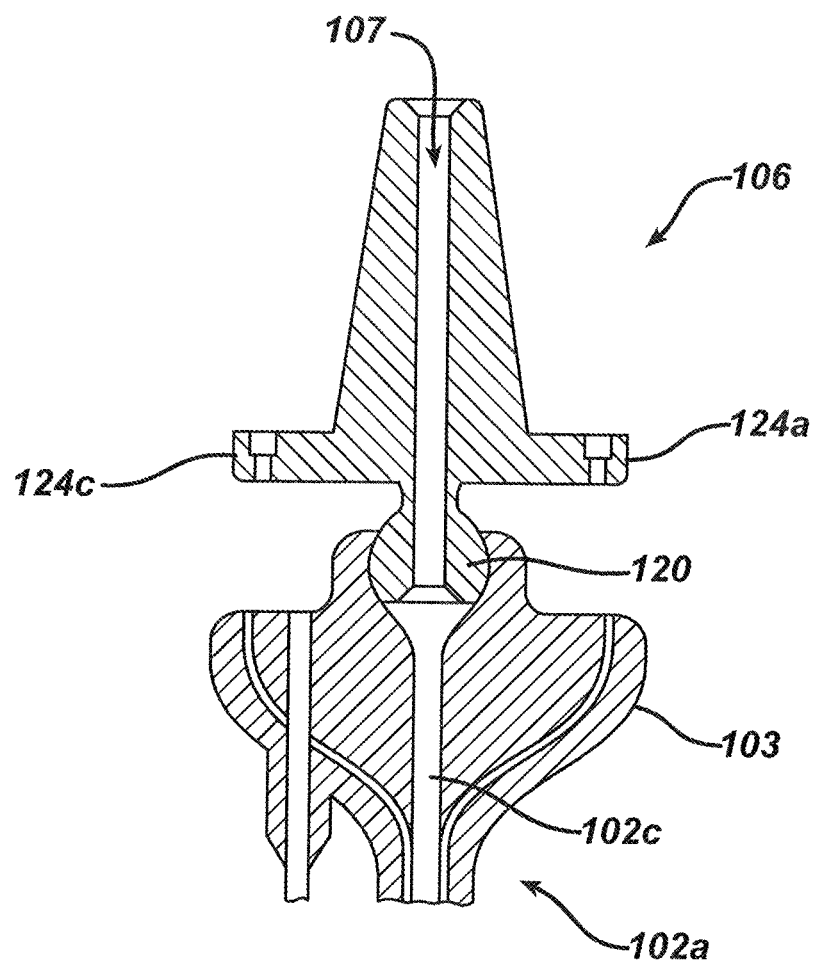


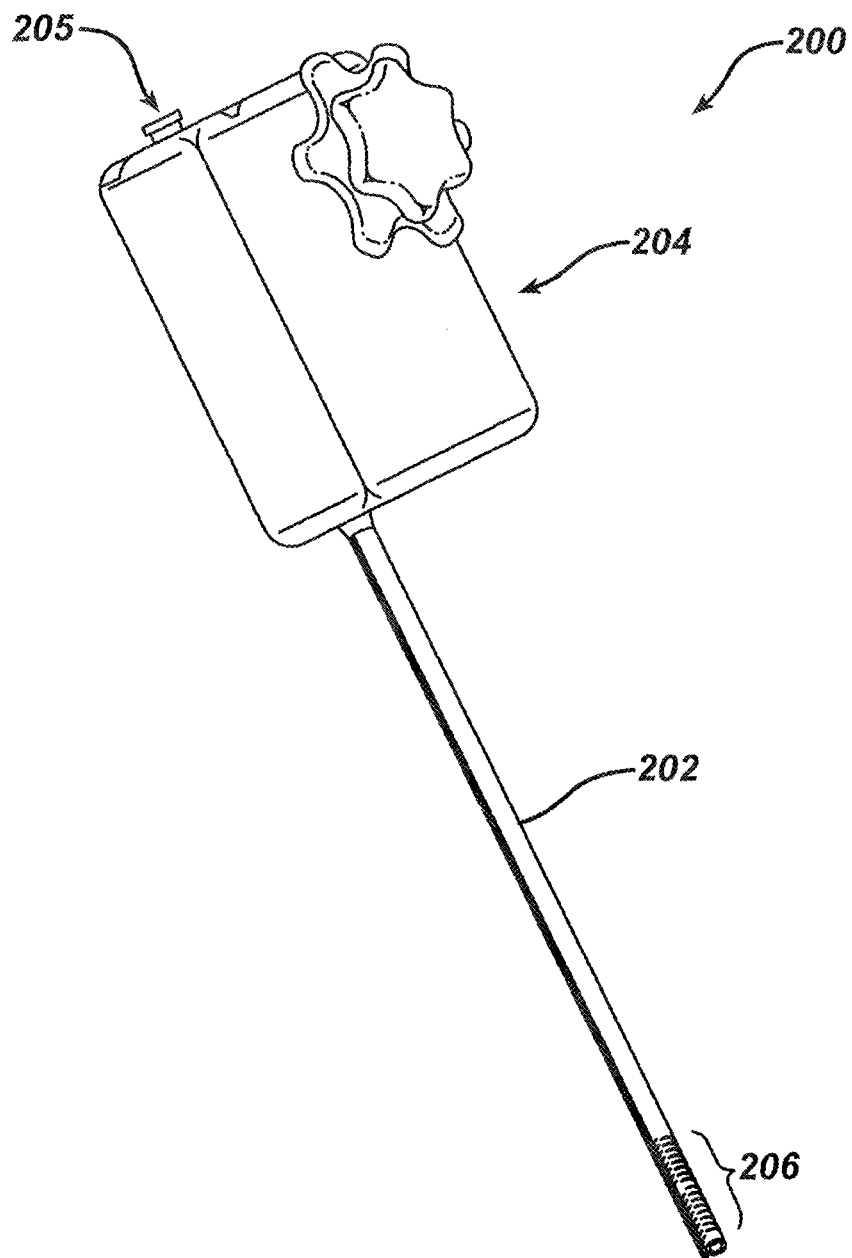
FIG. 14A

FIG. 14B

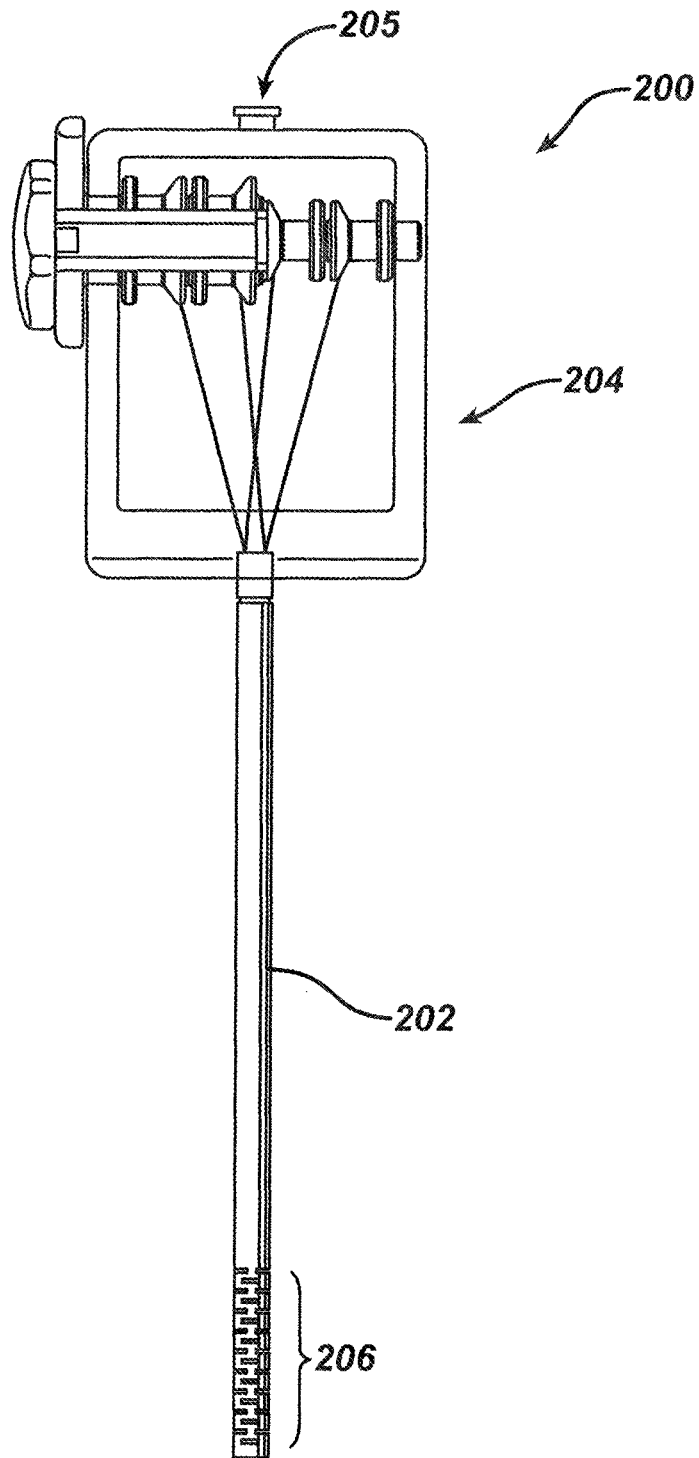


FIG. 15A

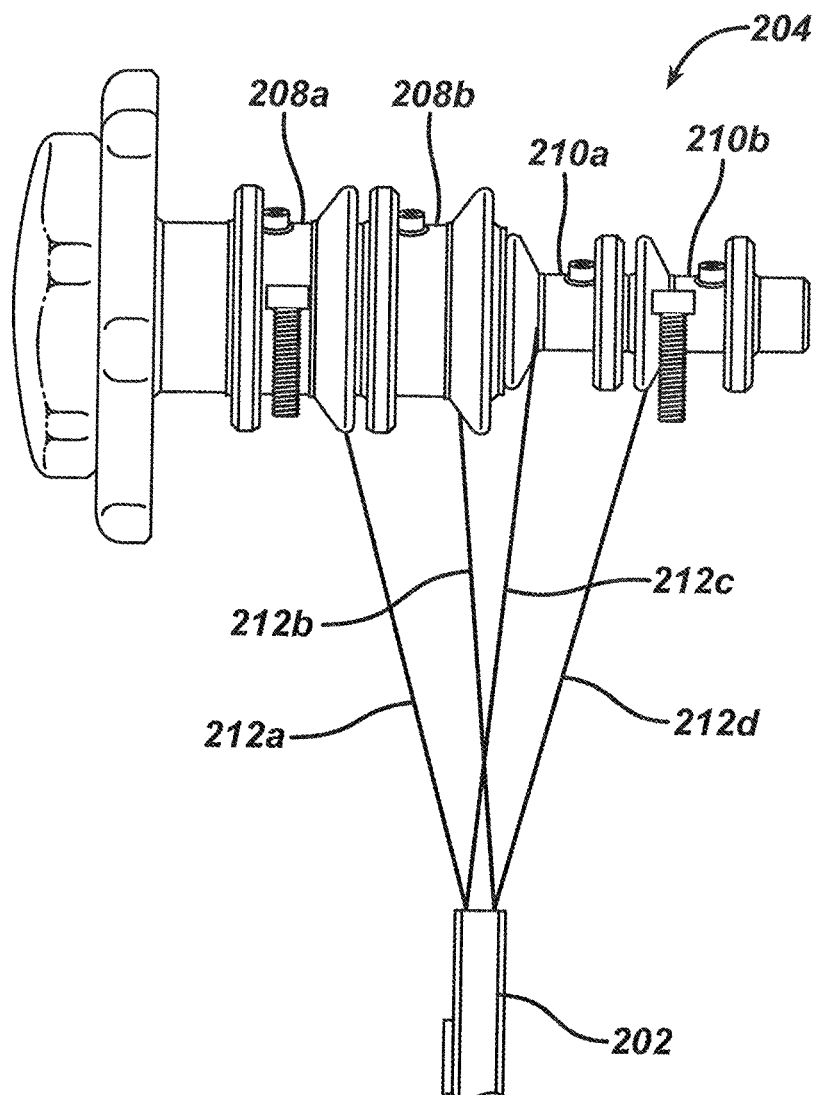


FIG. 15B

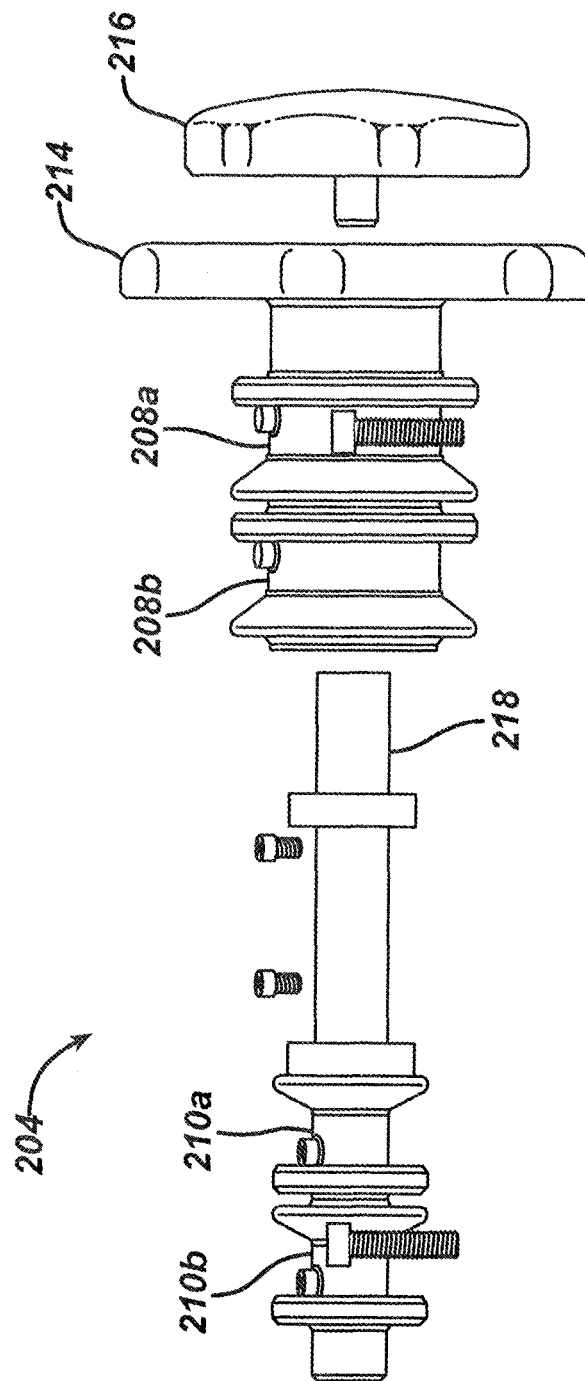


FIG. 16A

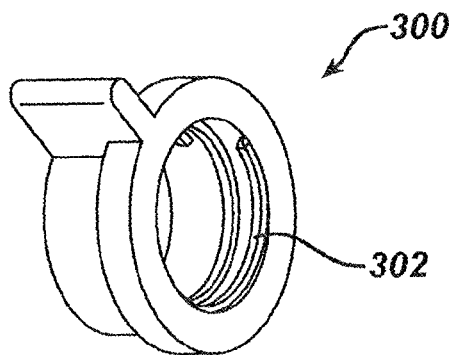
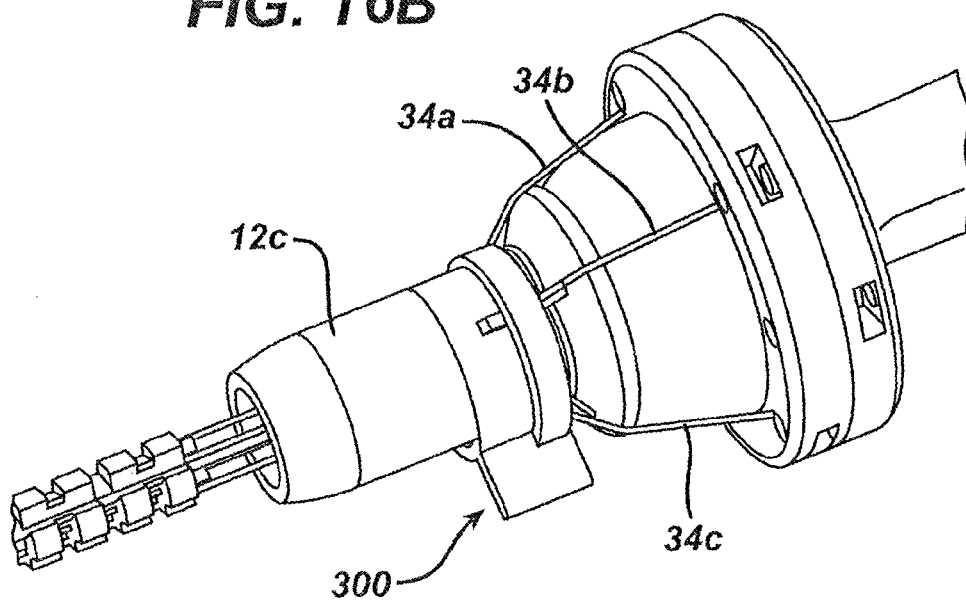


FIG. 16B



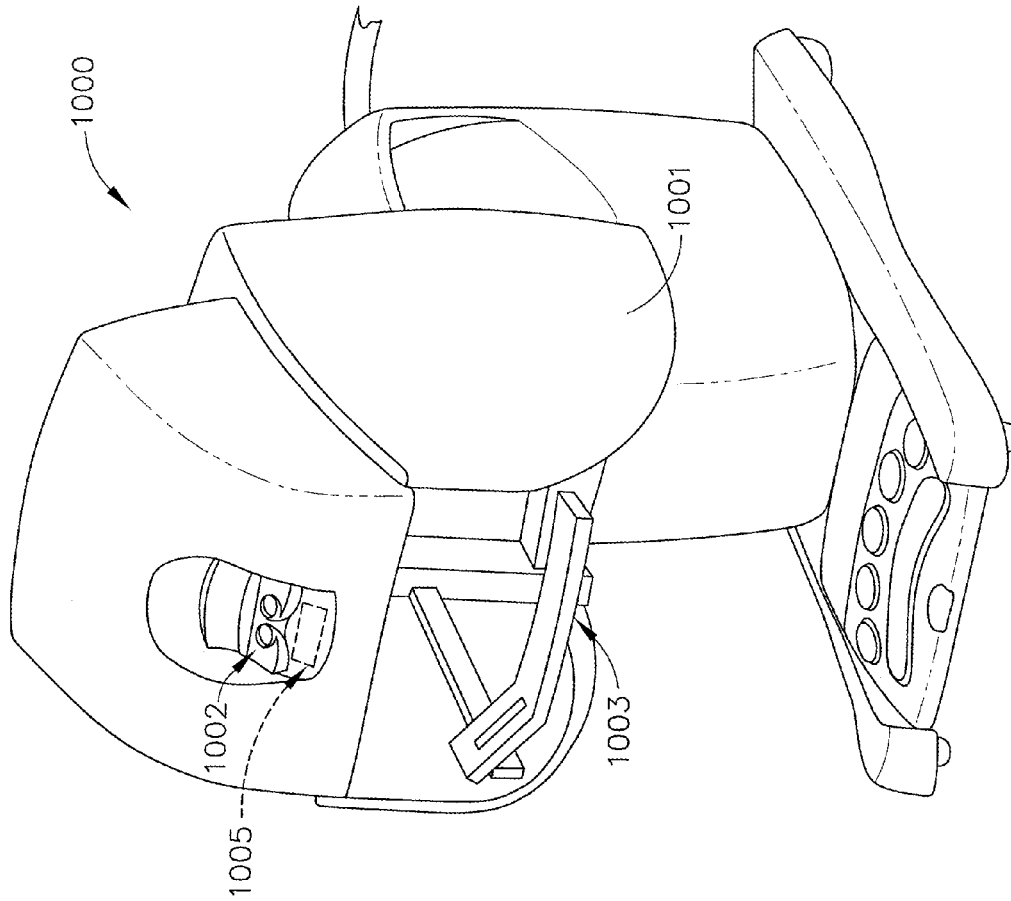


FIG. 17

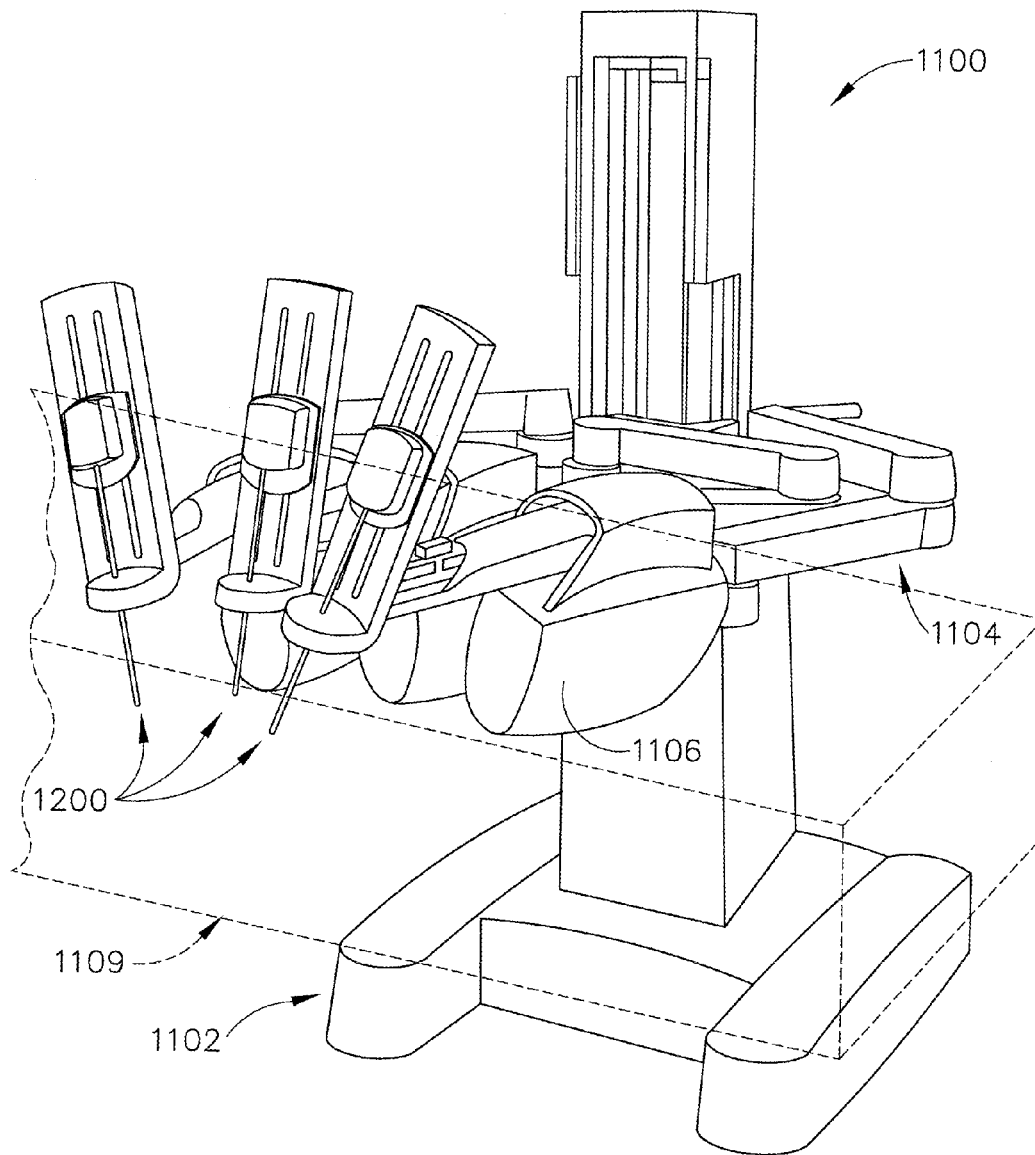


FIG. 18

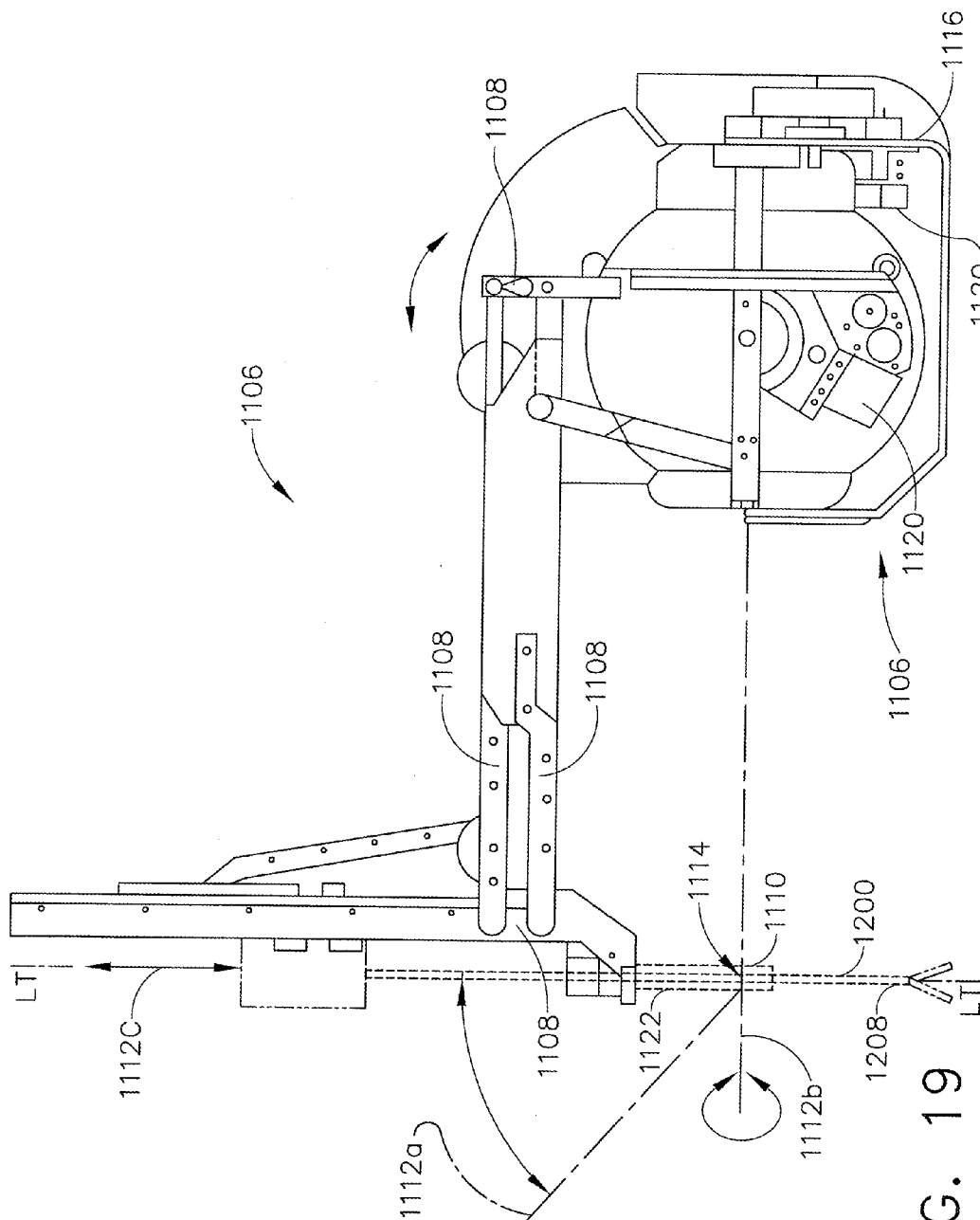


FIG. 19

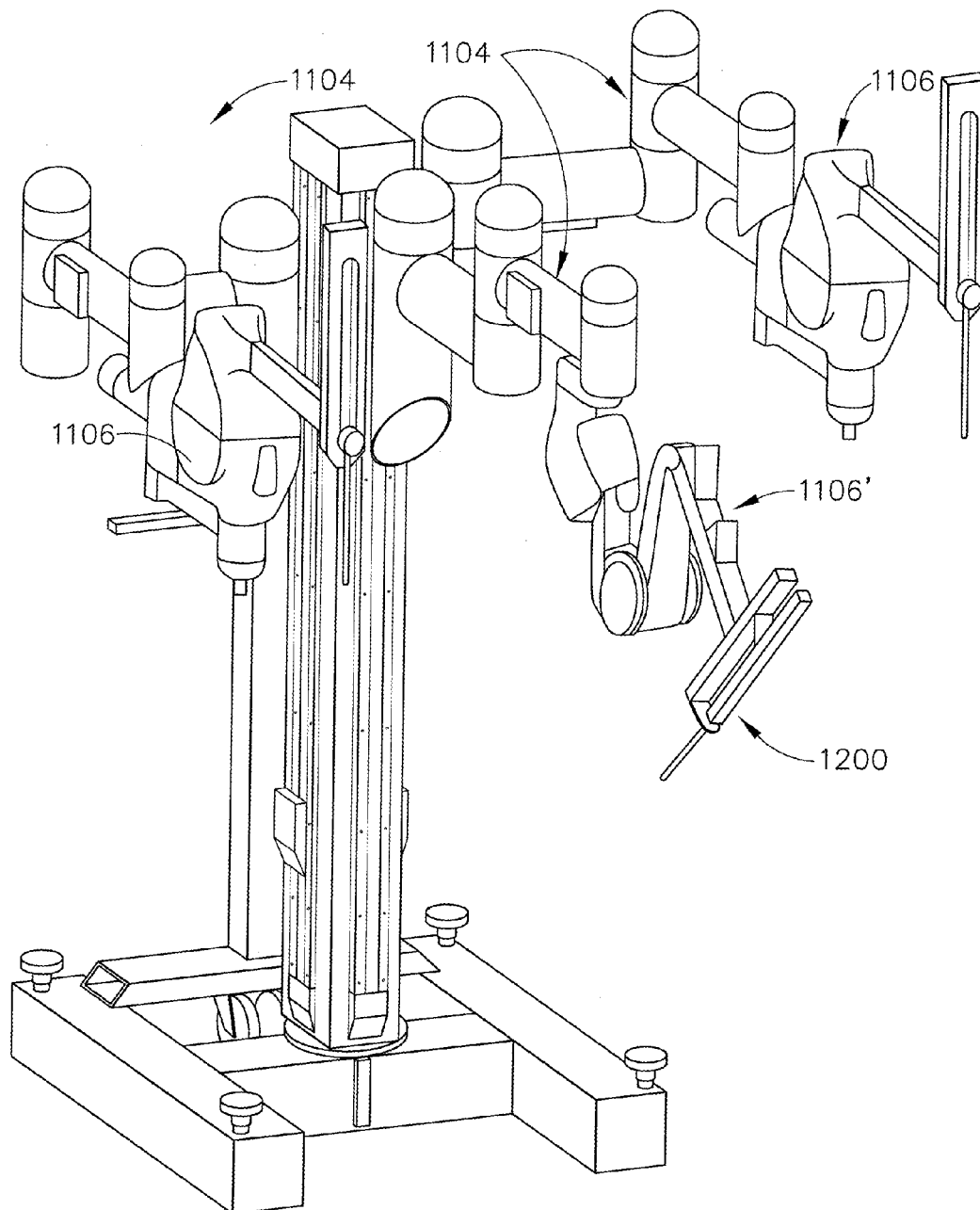


FIG. 20

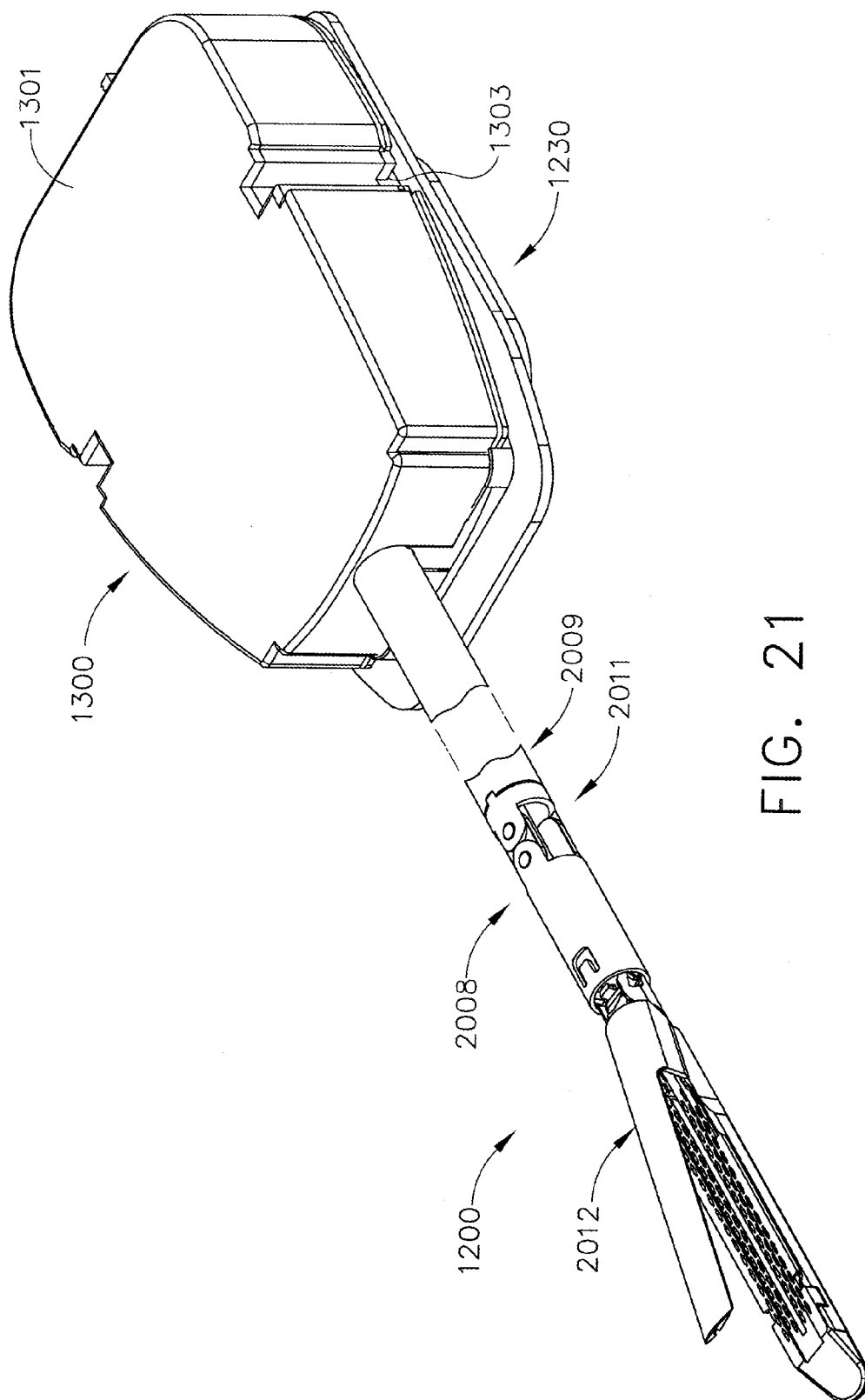


FIG. 21

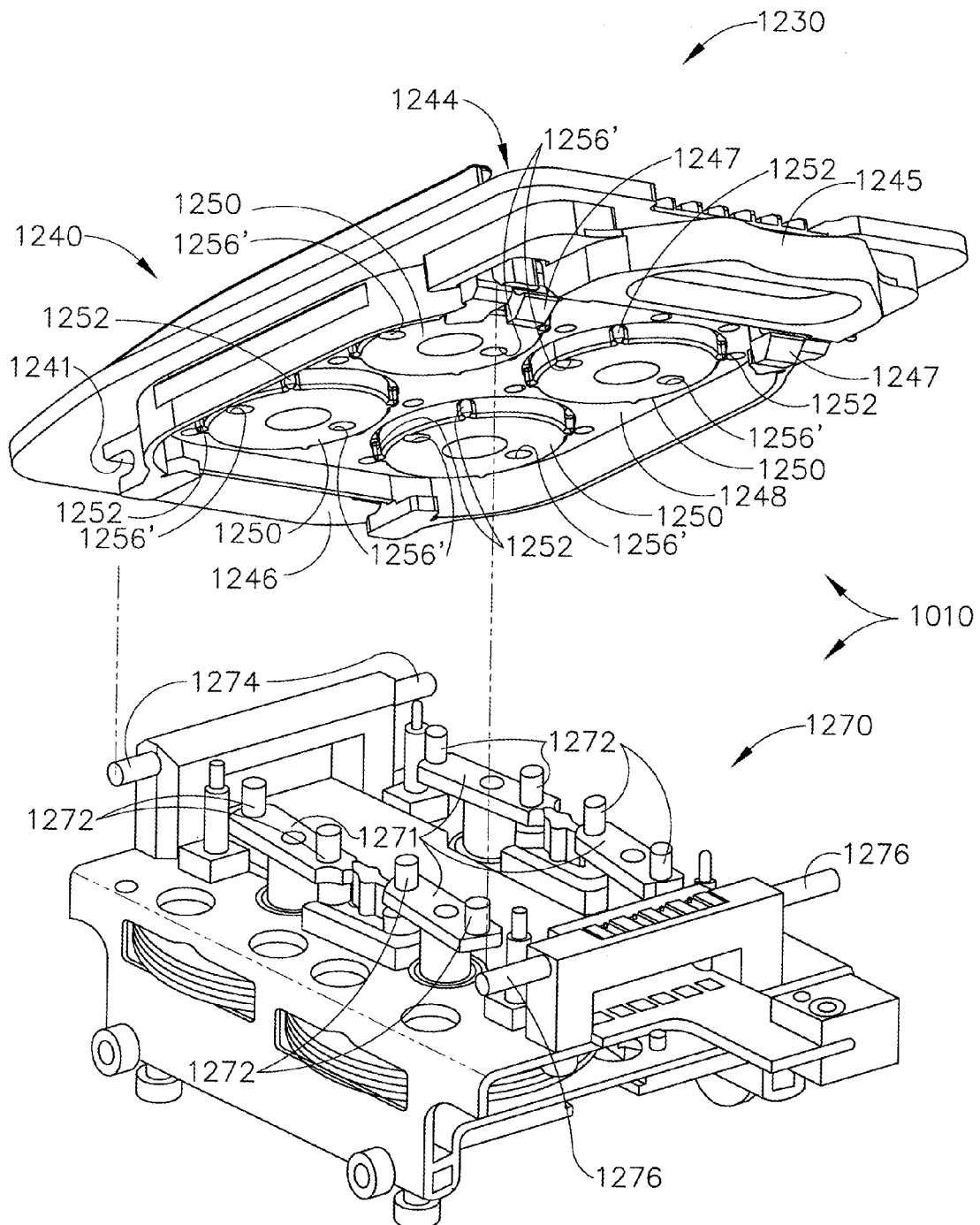


FIG. 22

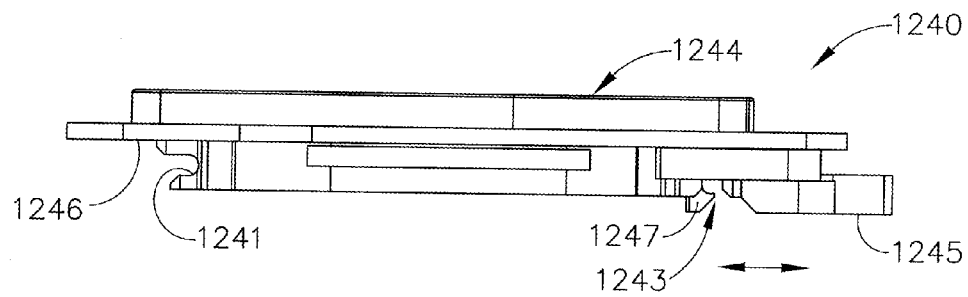


FIG. 23

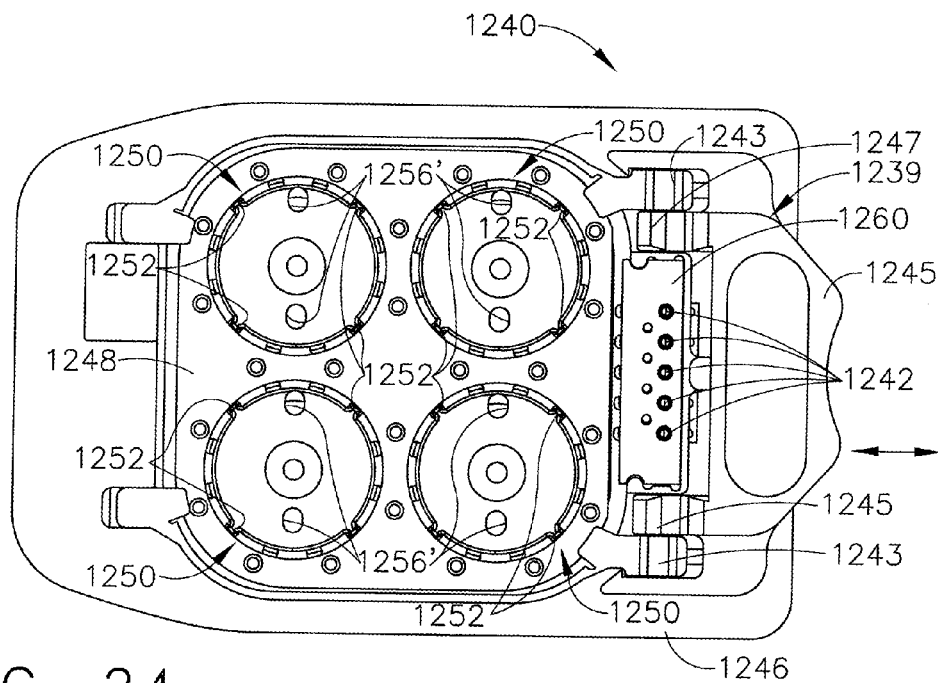


FIG. 24

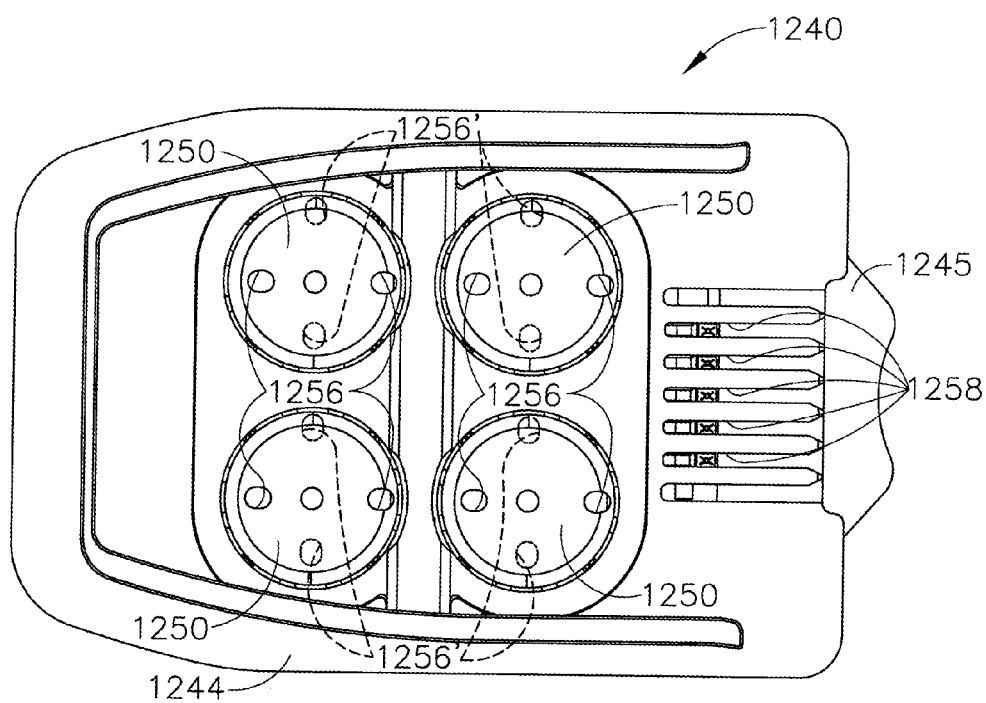


FIG. 25

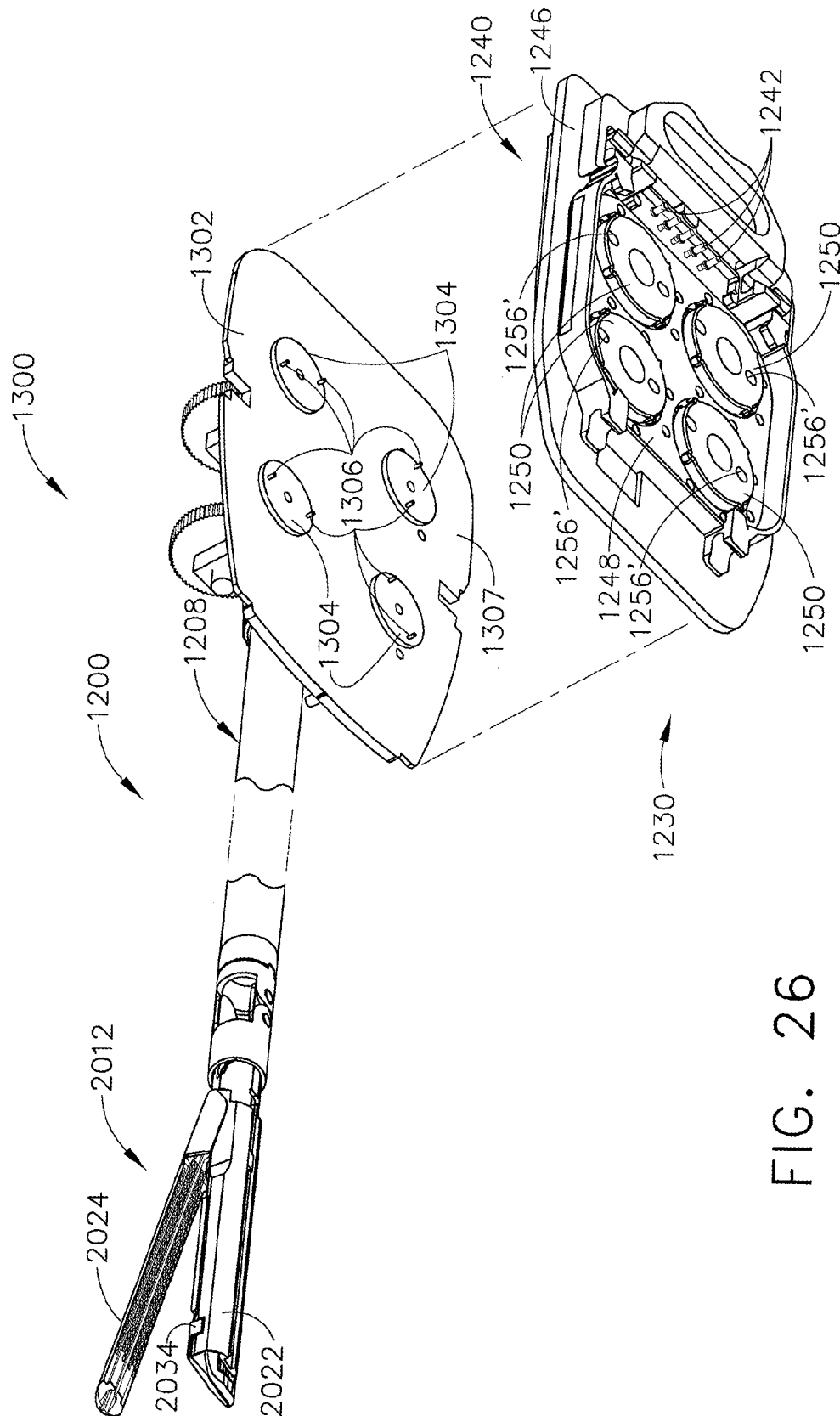


FIG. 26

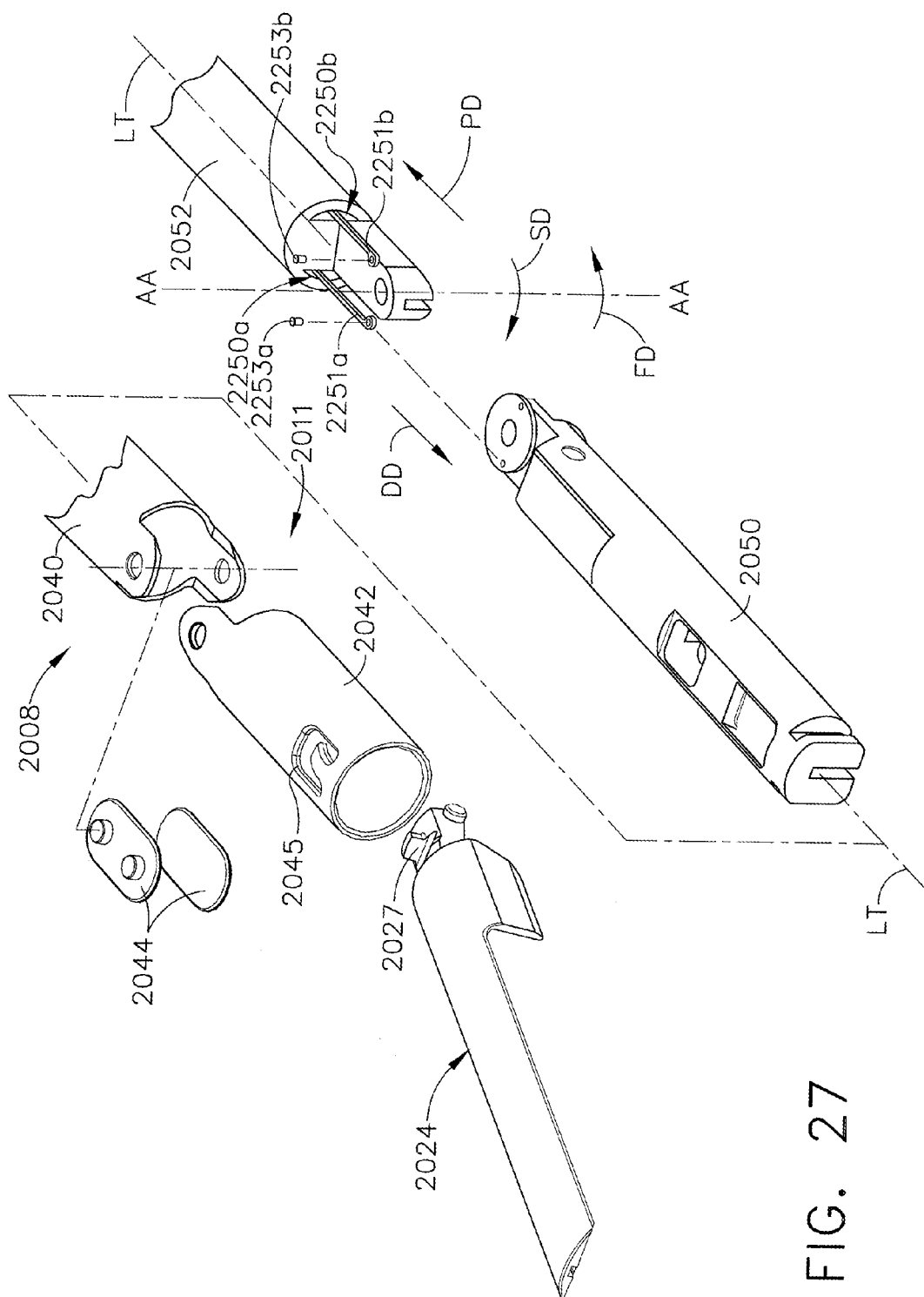
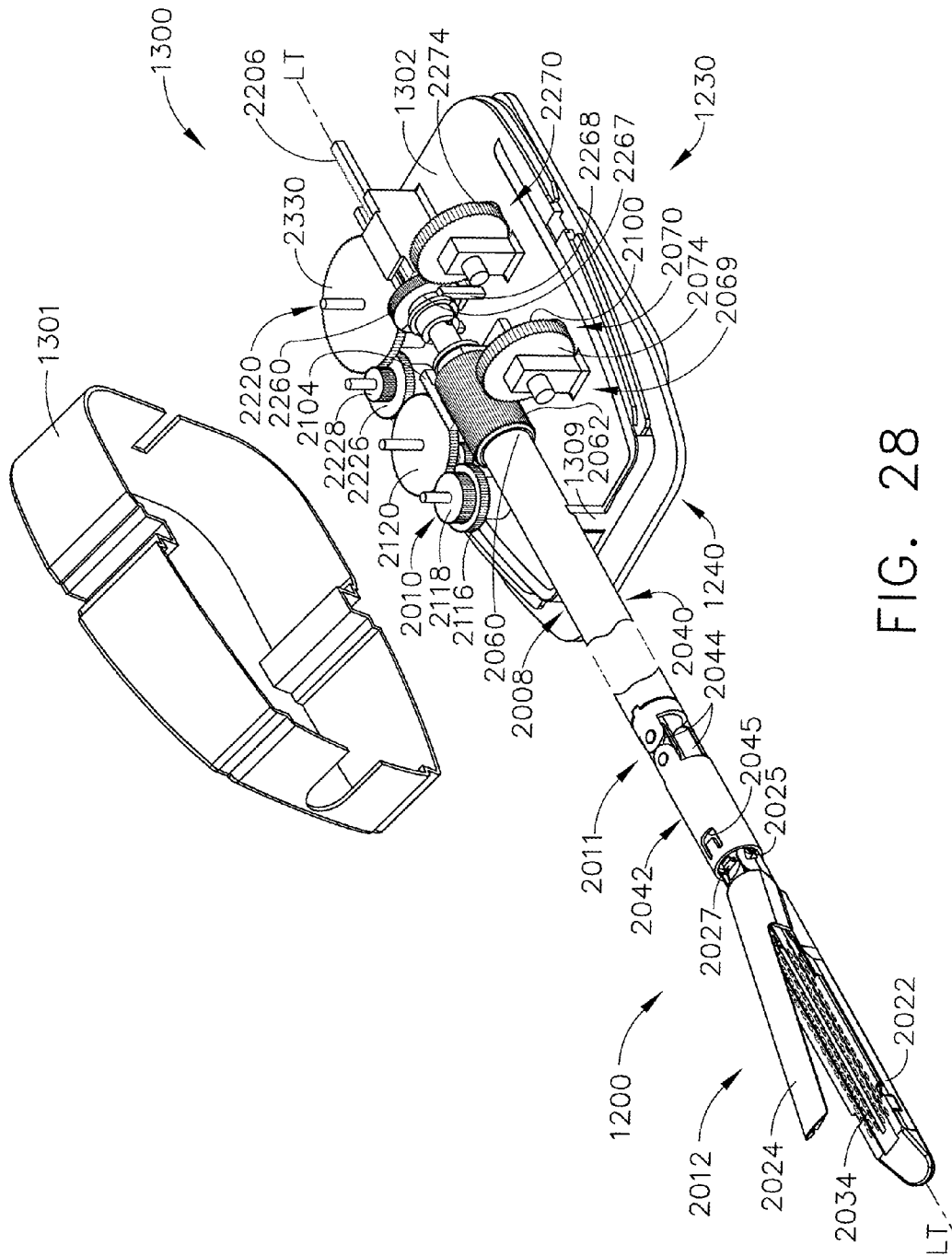


FIG. 27



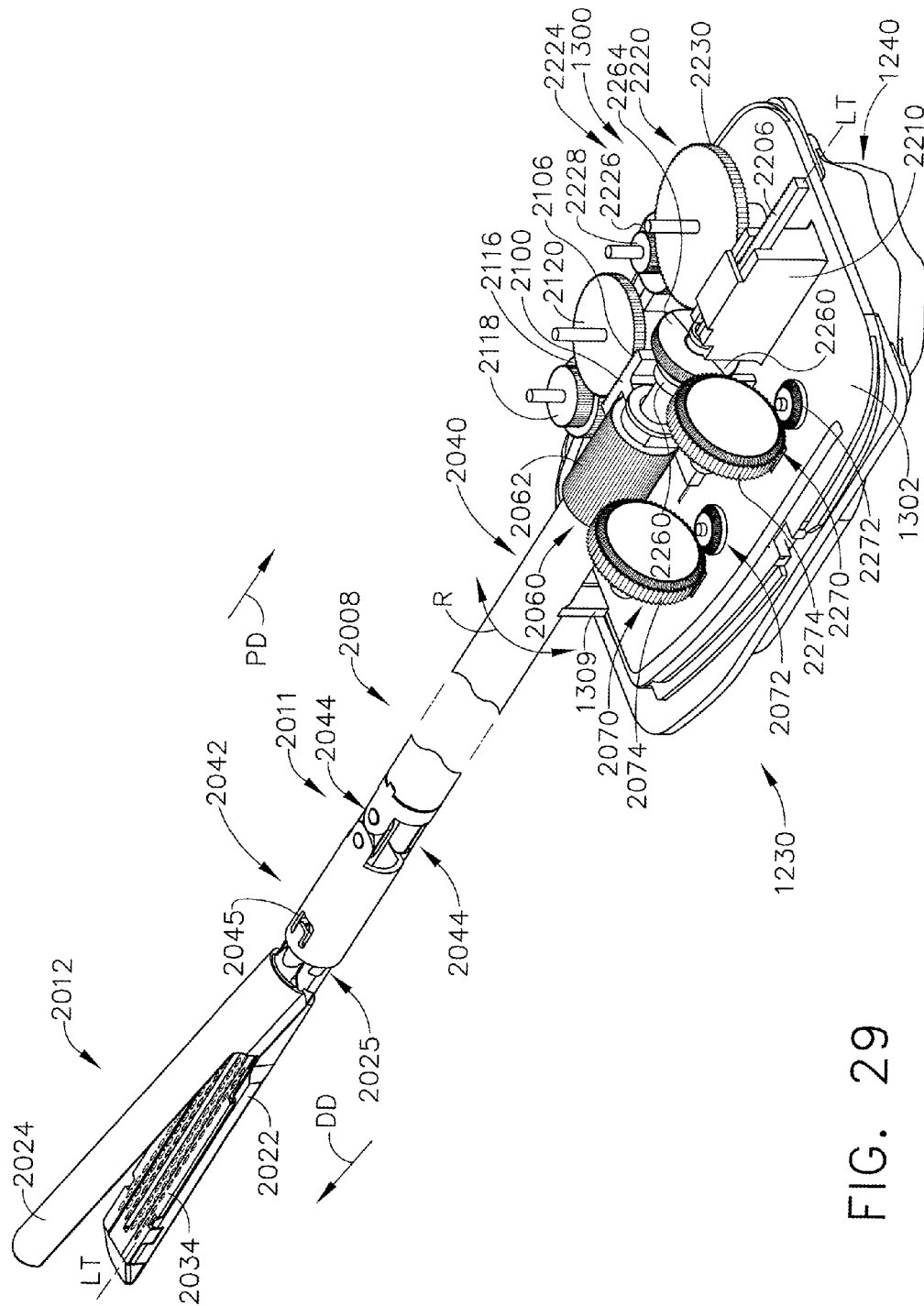


FIG. 29

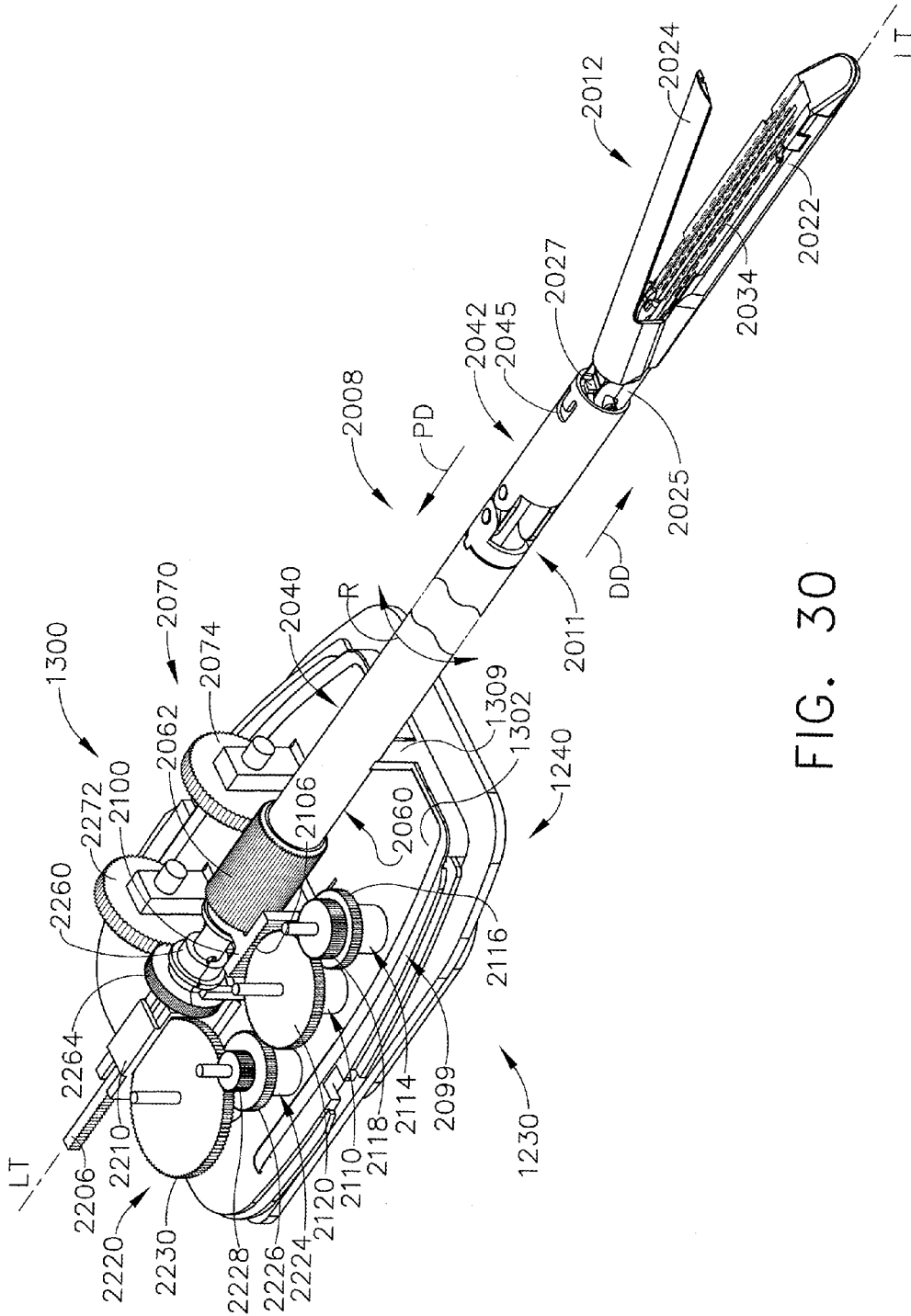
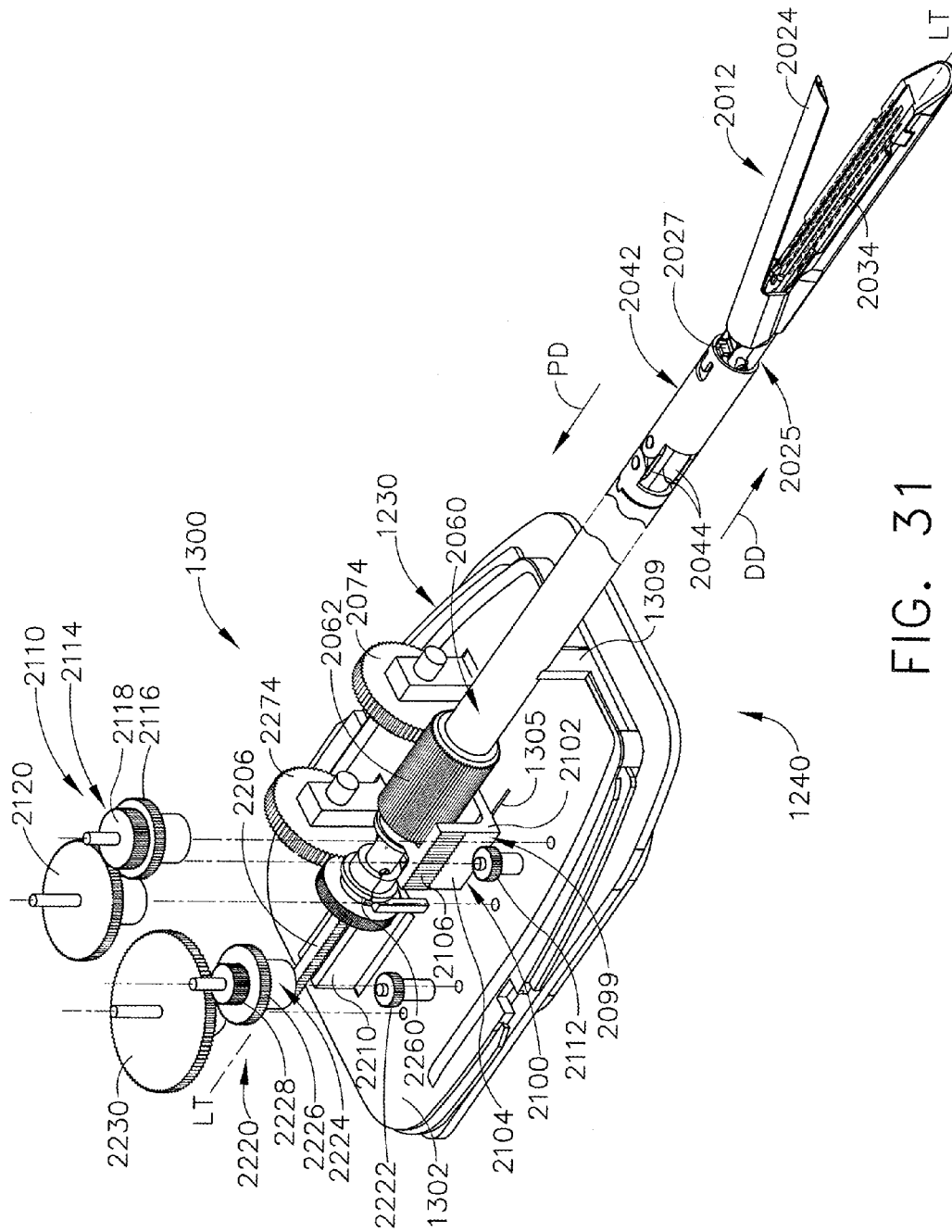


FIG. 30



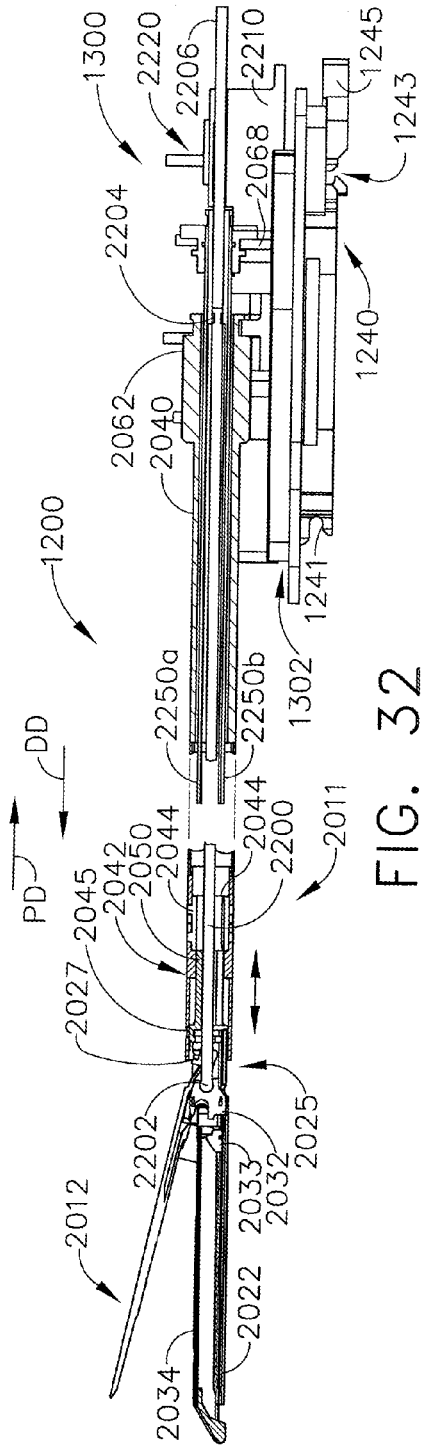


FIG. 32

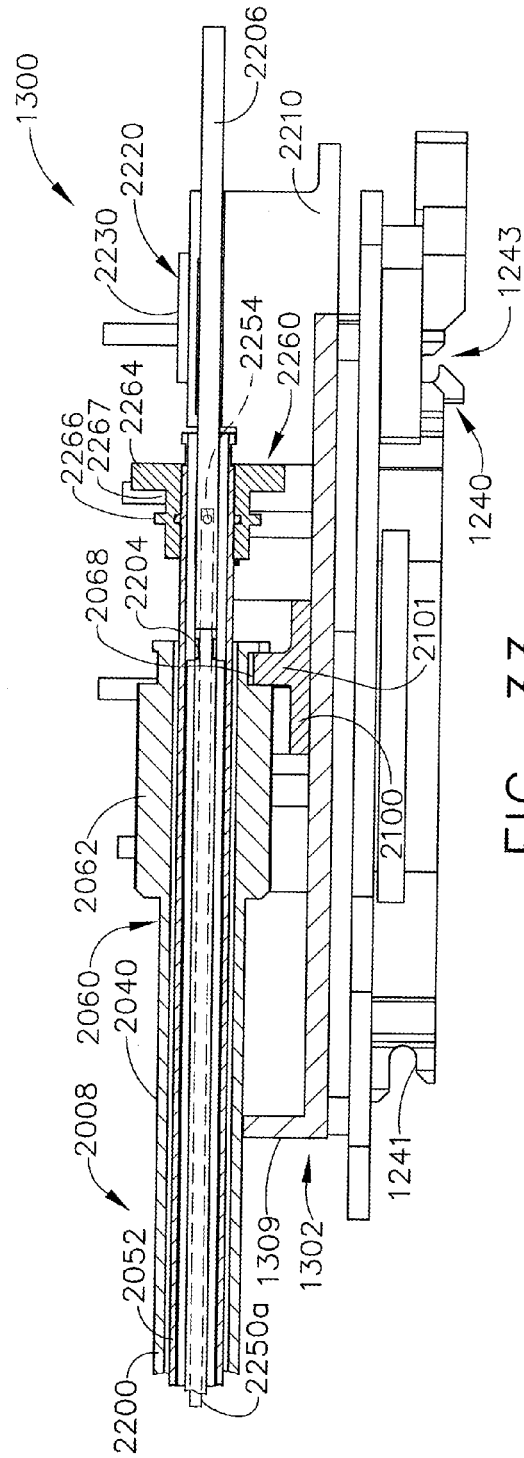


FIG. 33

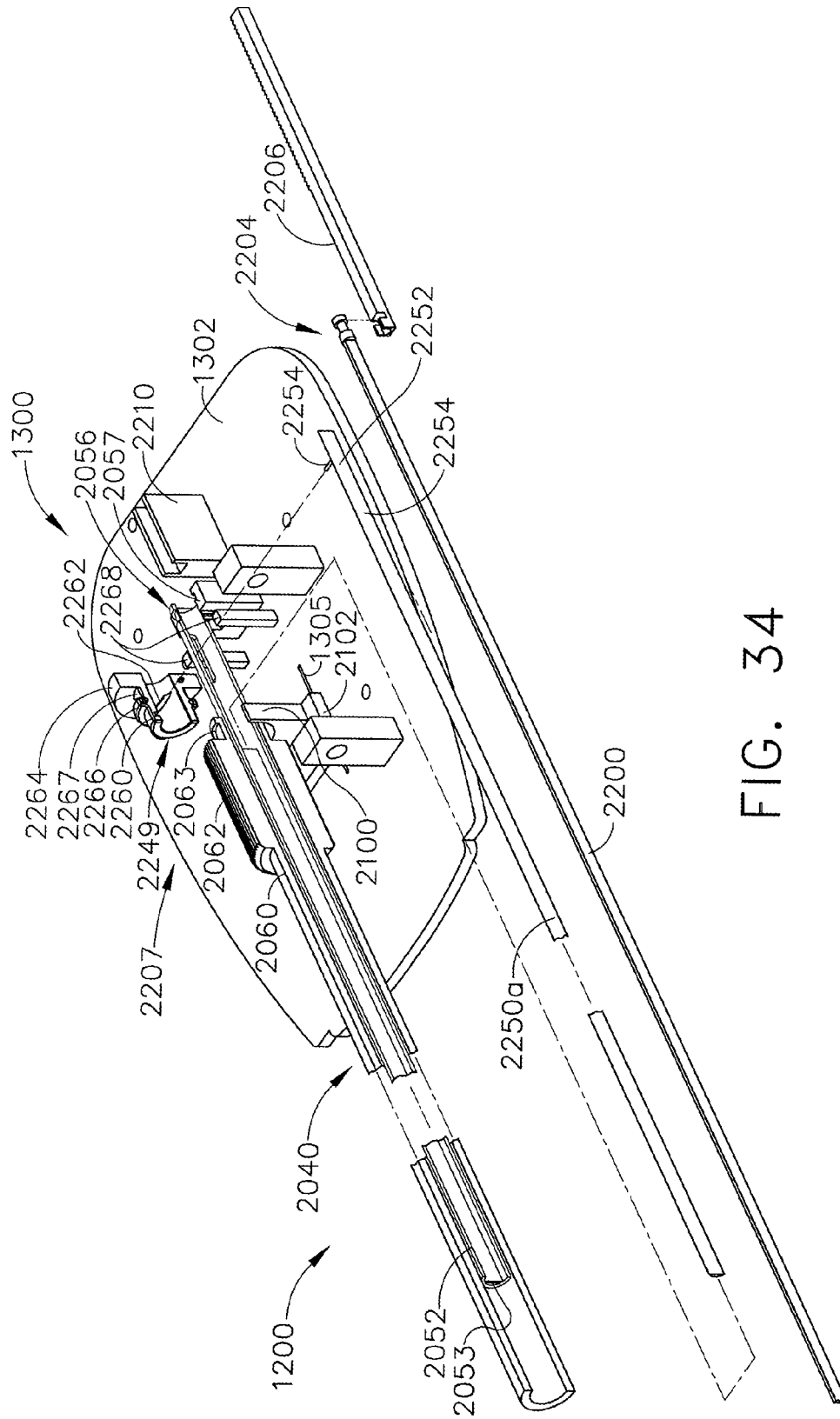


FIG. 34

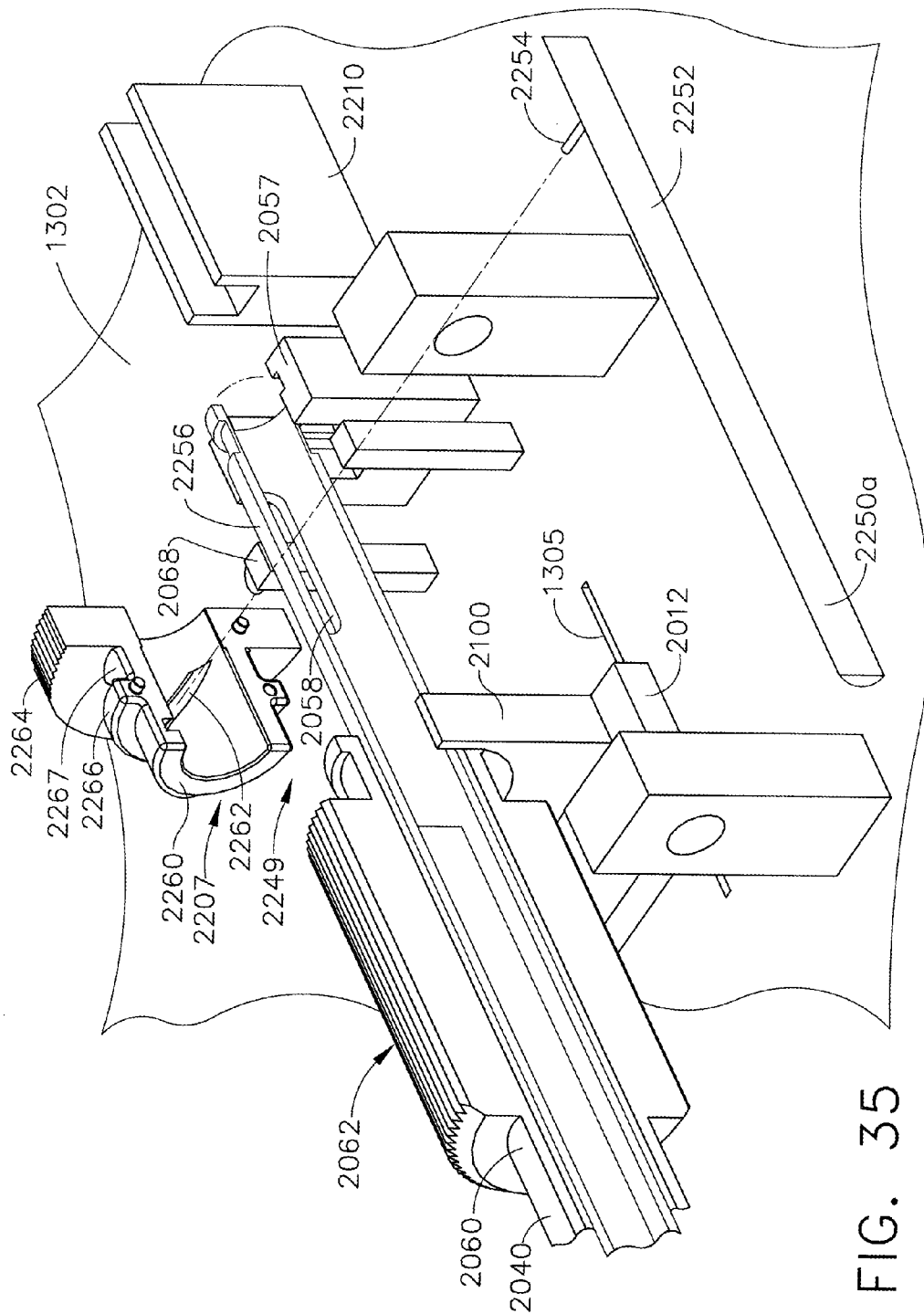


FIG. 35

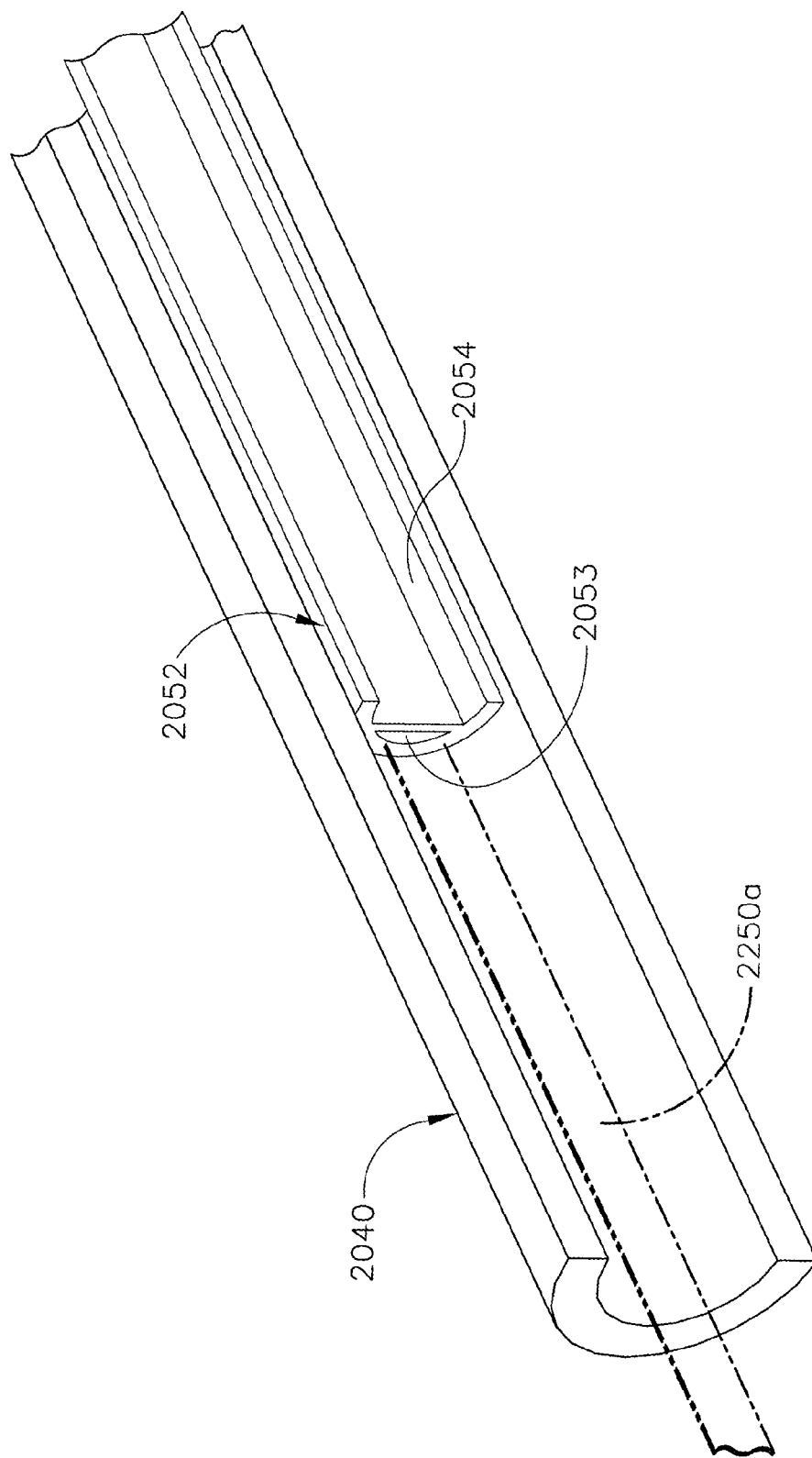


FIG. 36

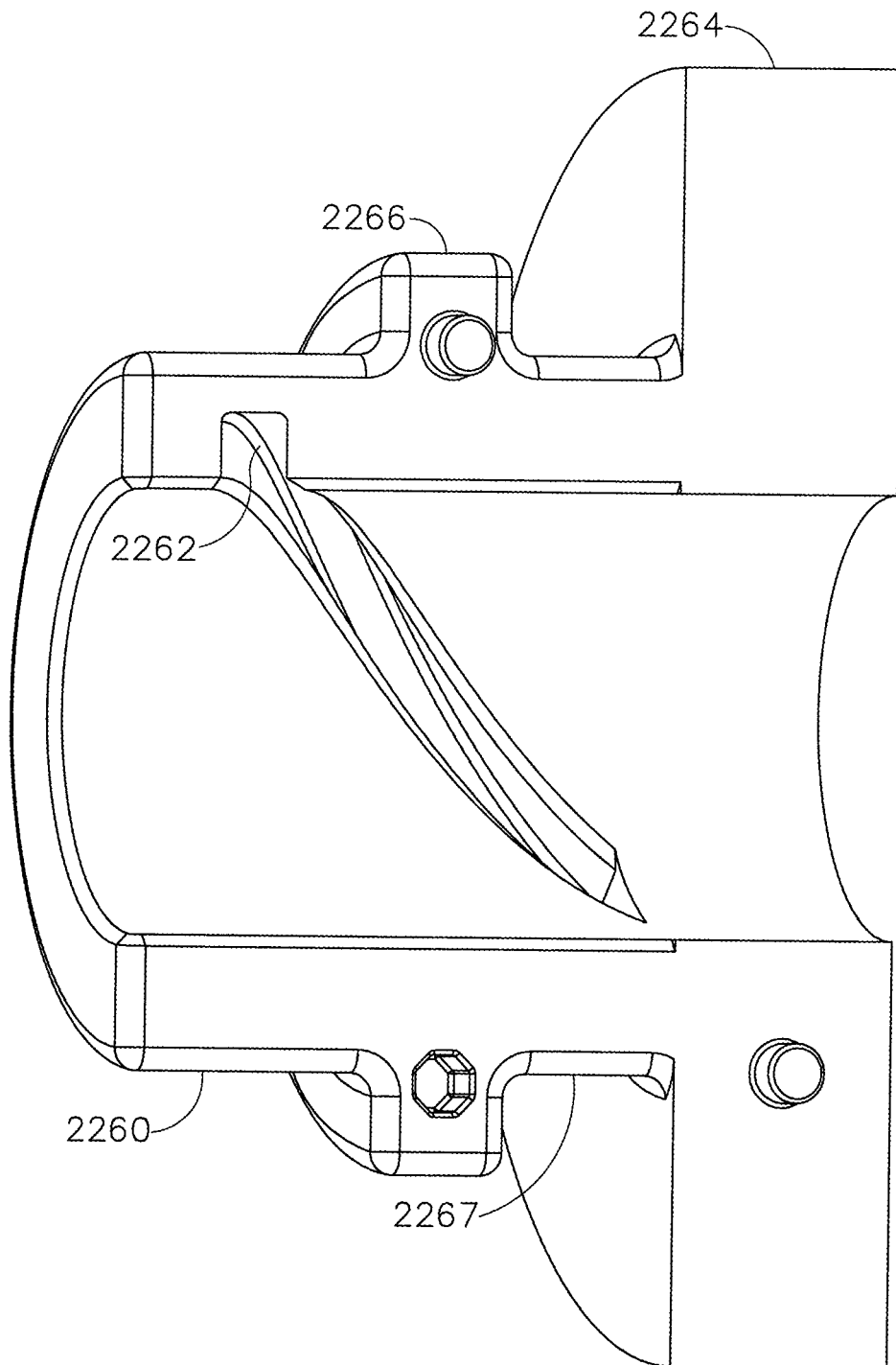


FIG. 37

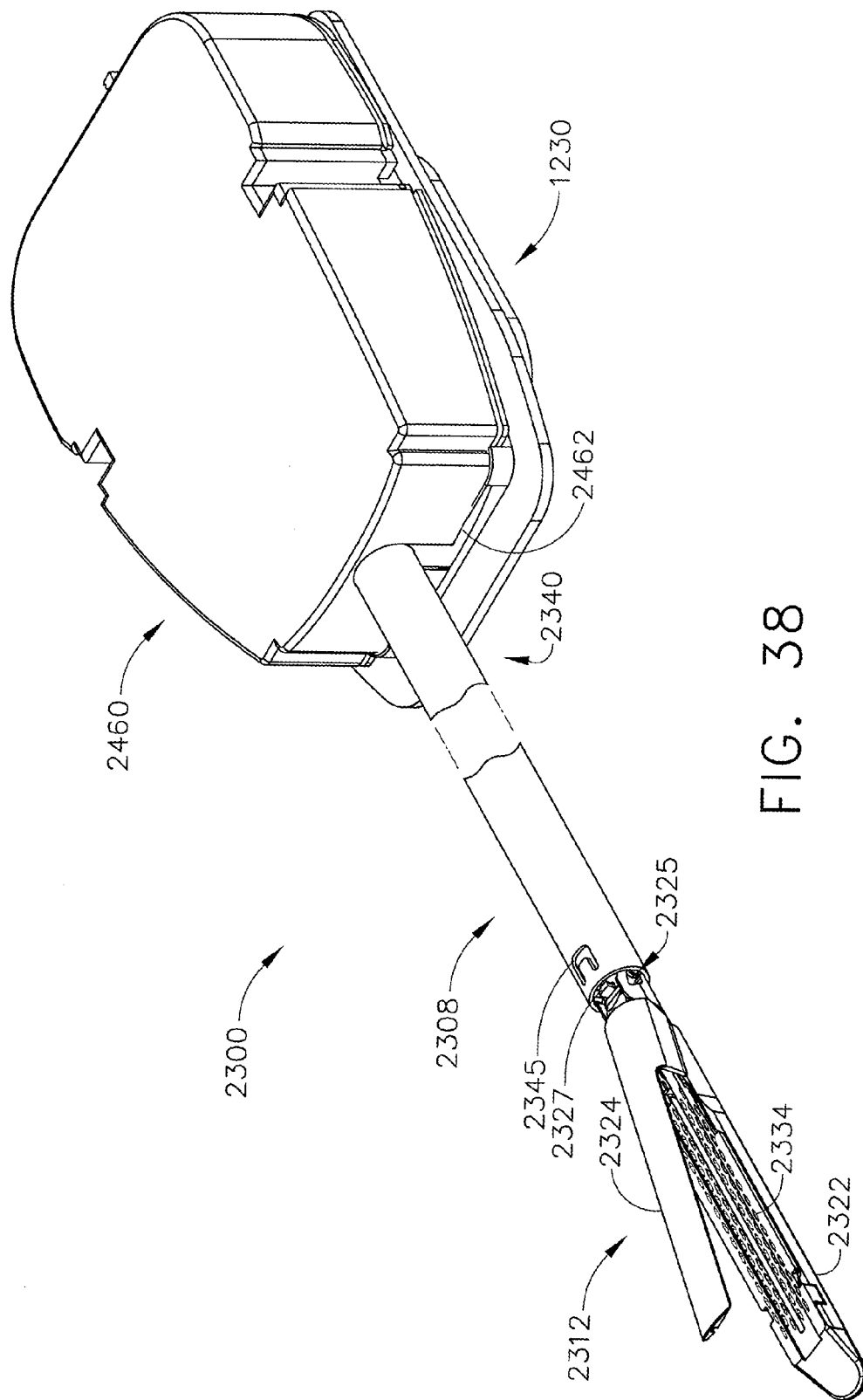
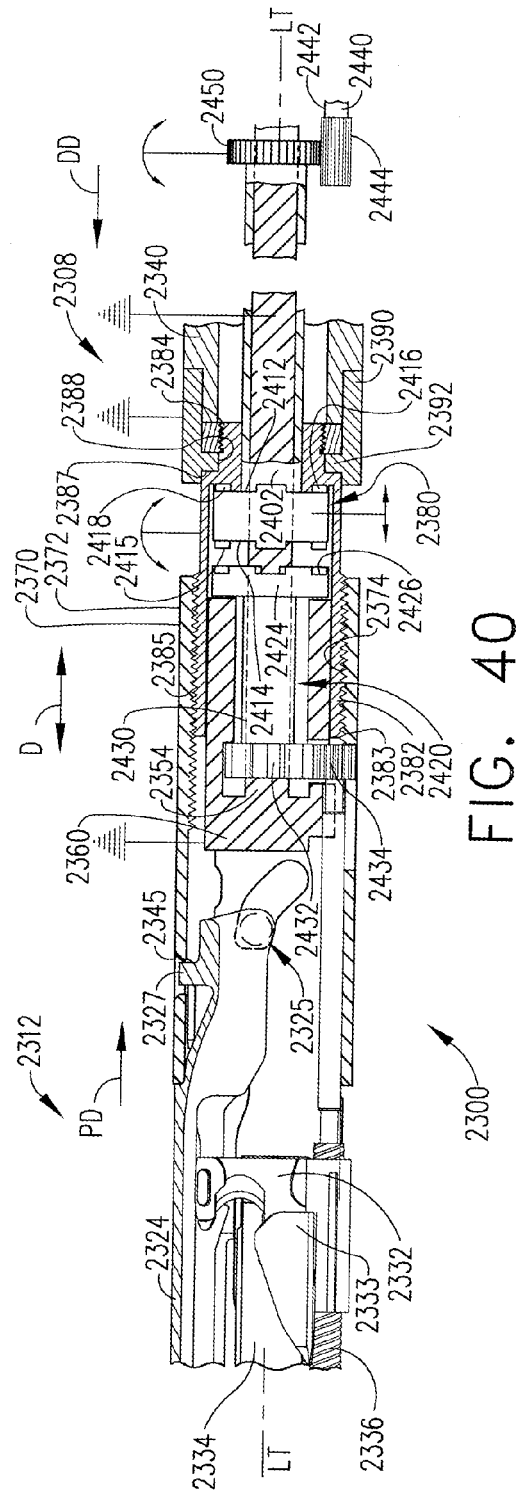
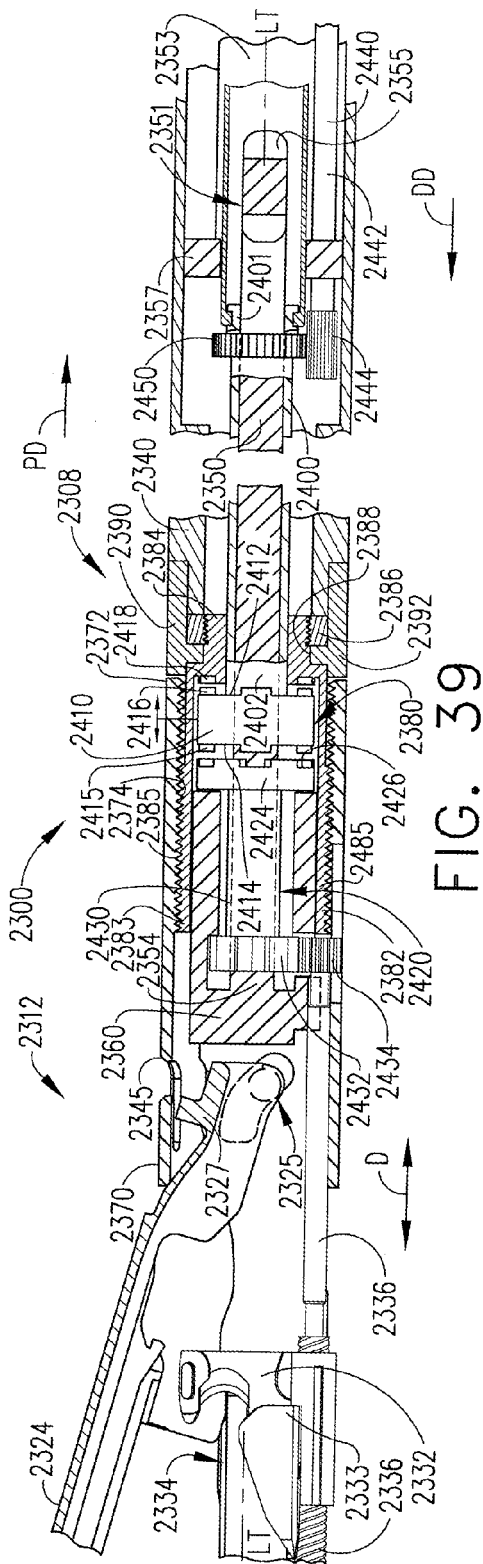


FIG. 38



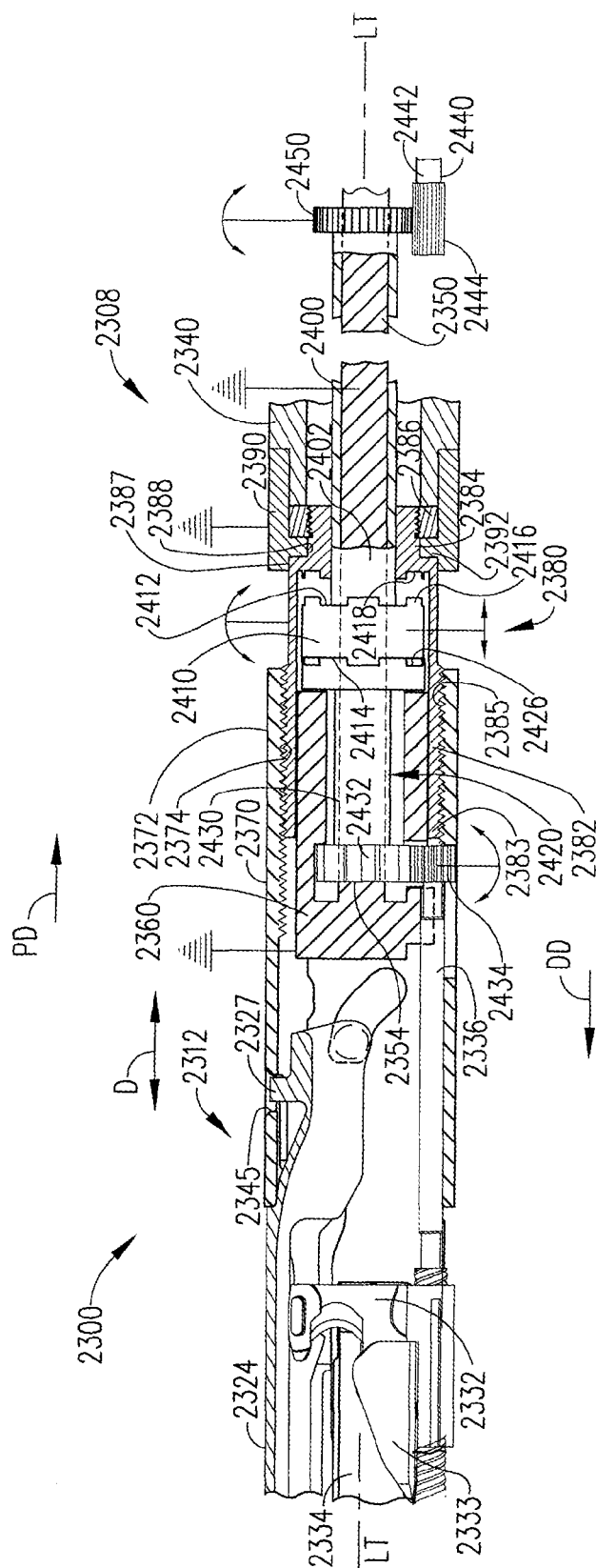


FIG. 41

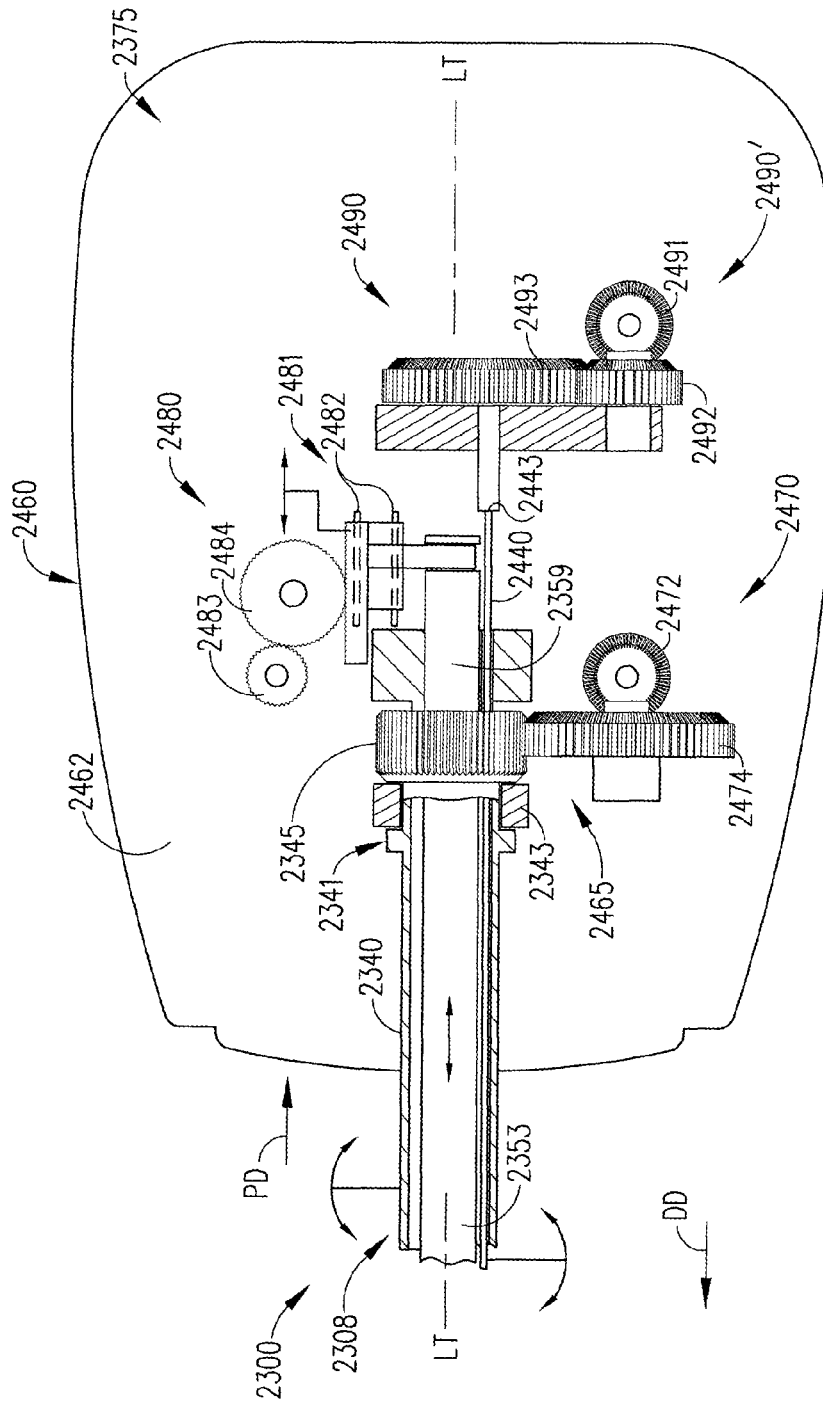


FIG. 42

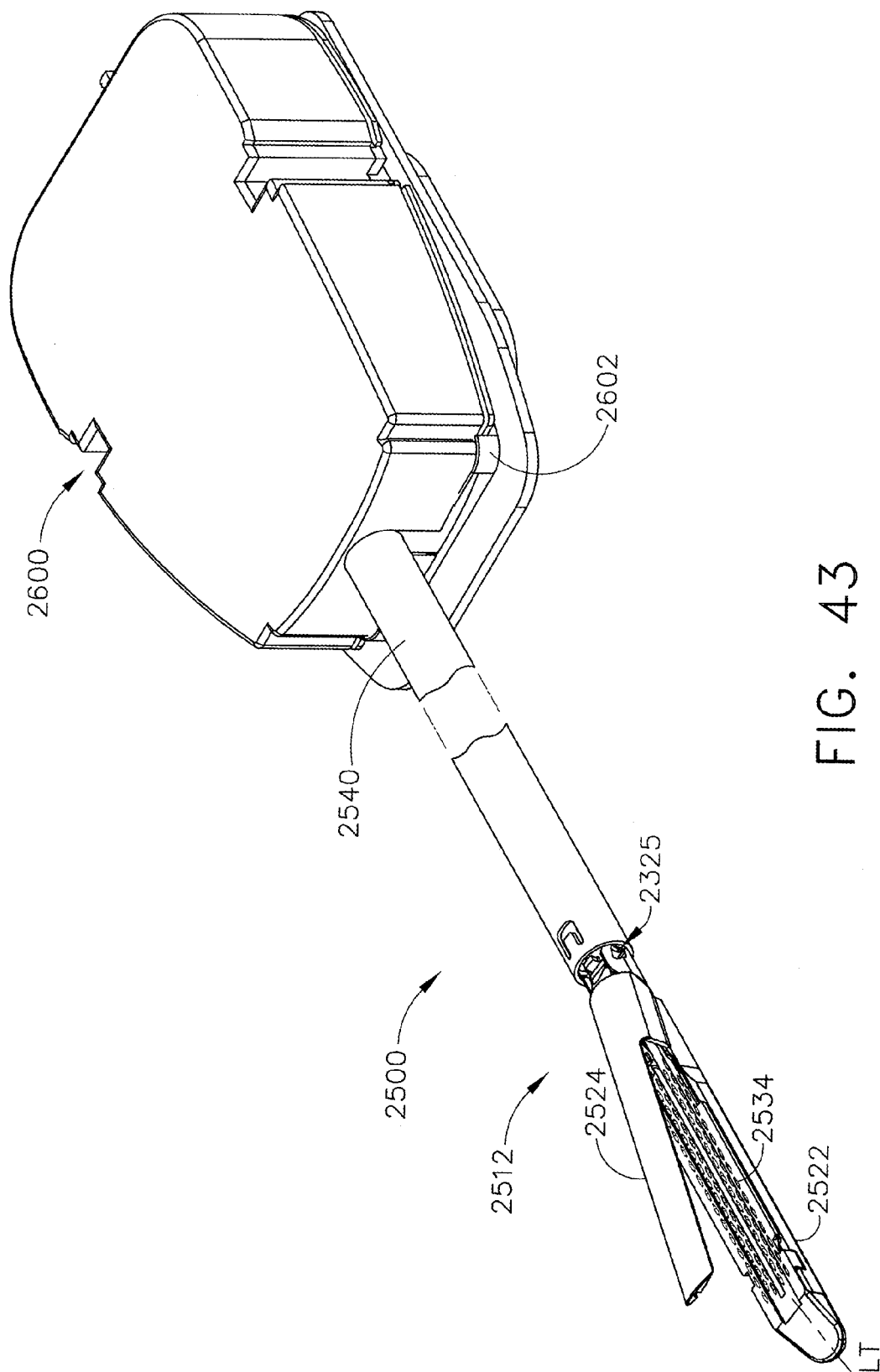


FIG. 43

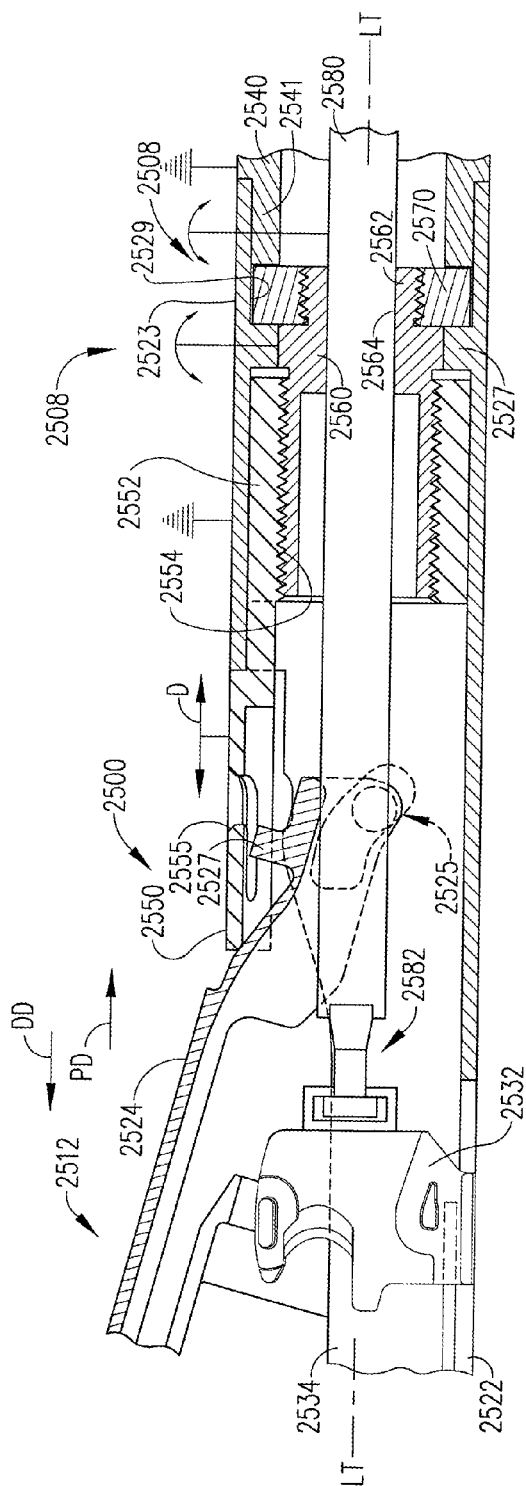


FIG. 44

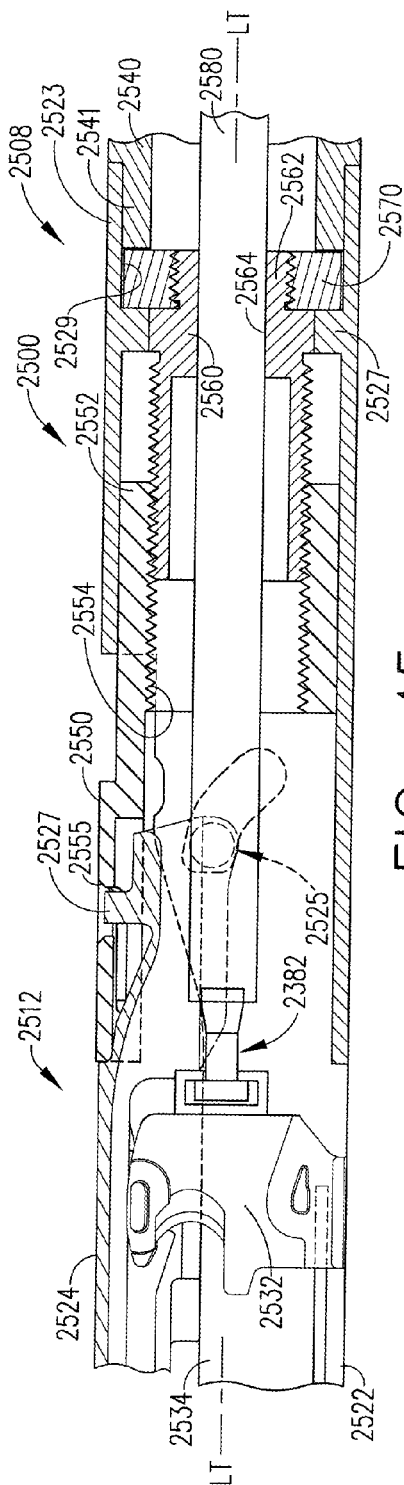


FIG. 45

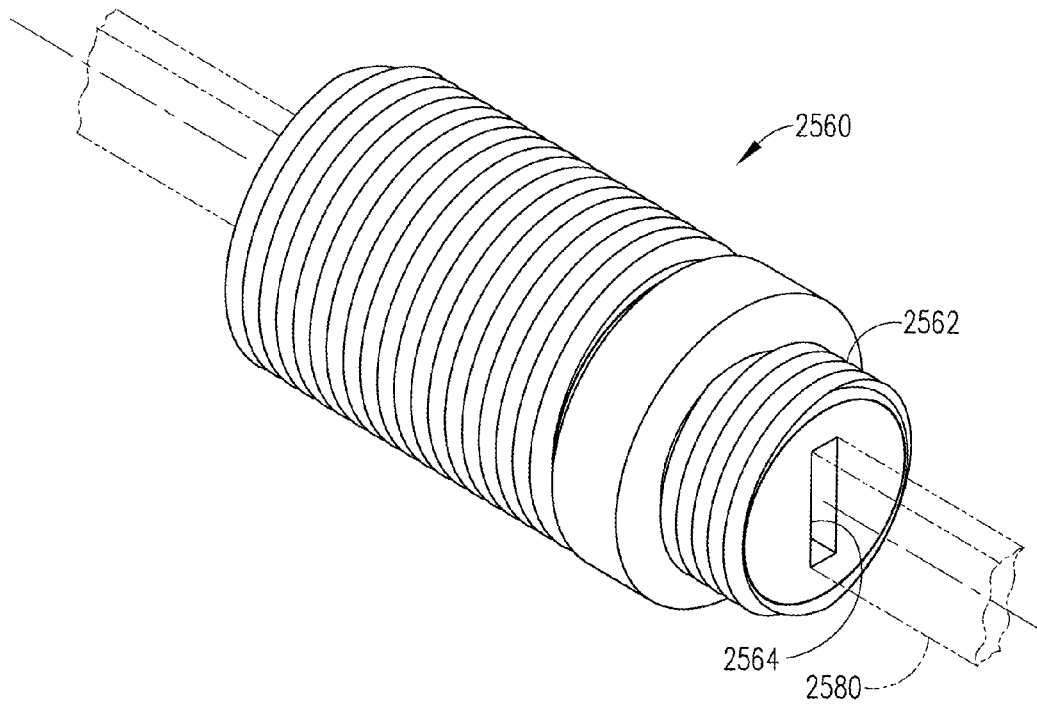


FIG. 46

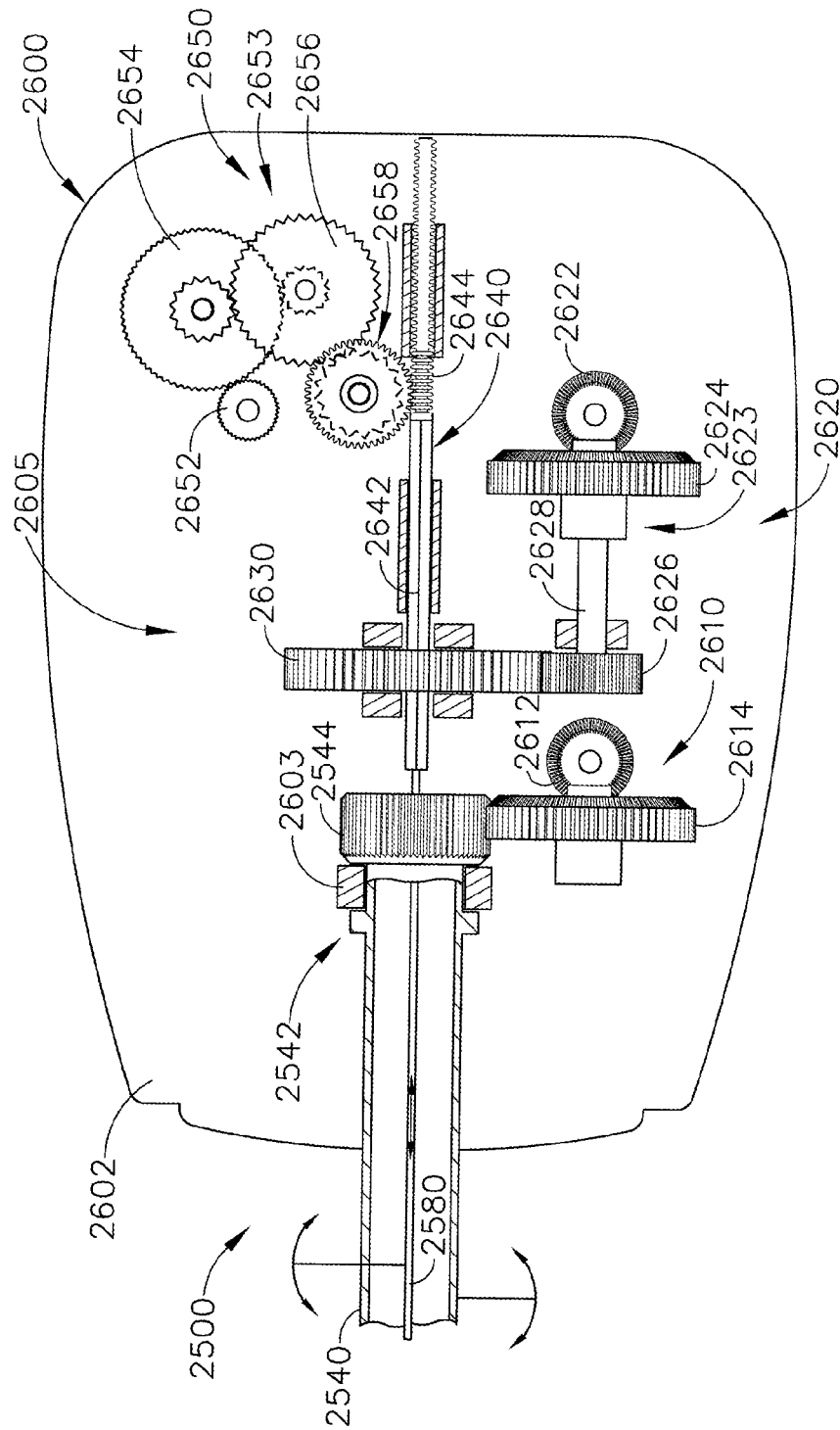
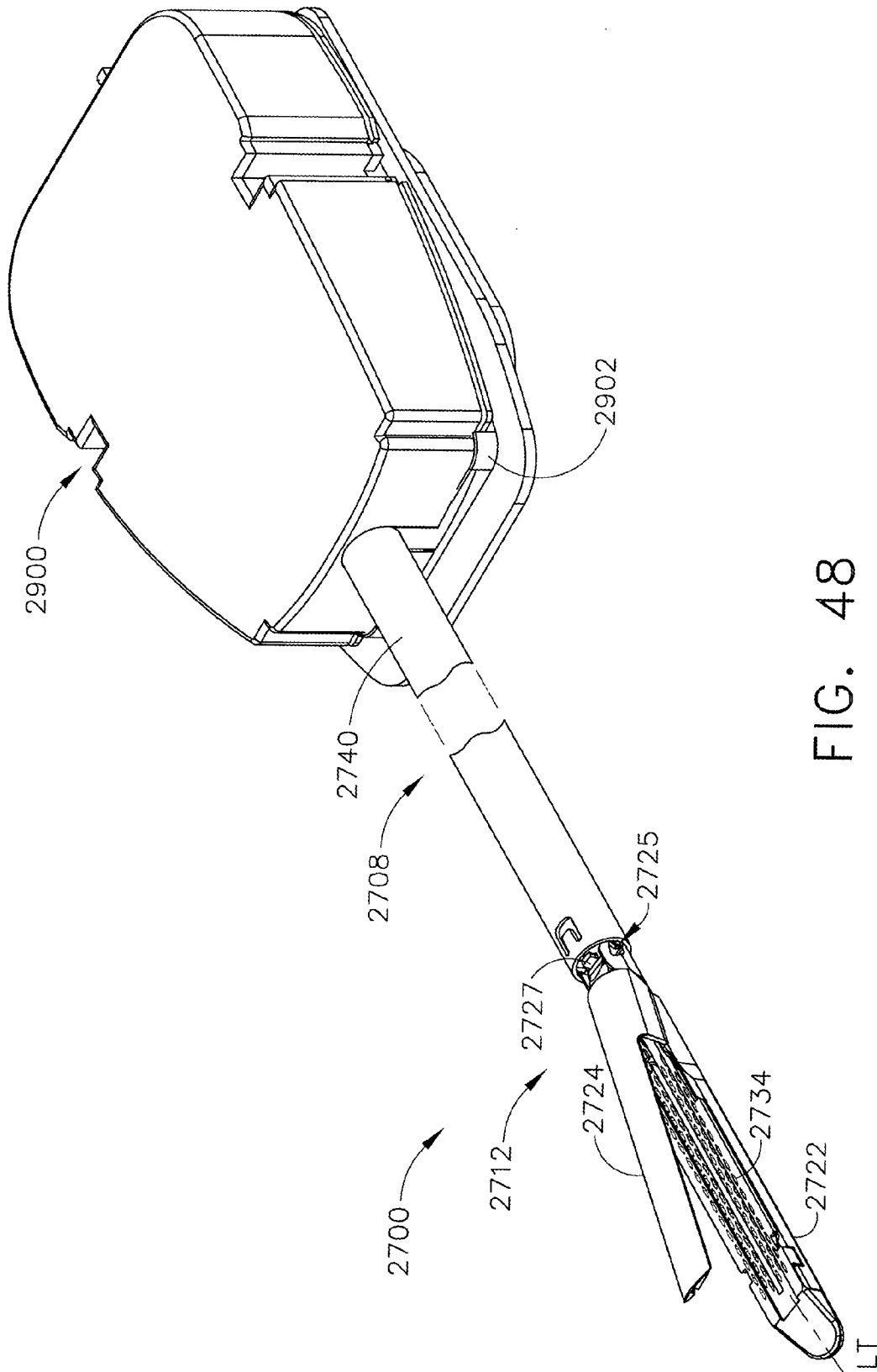


FIG. 47



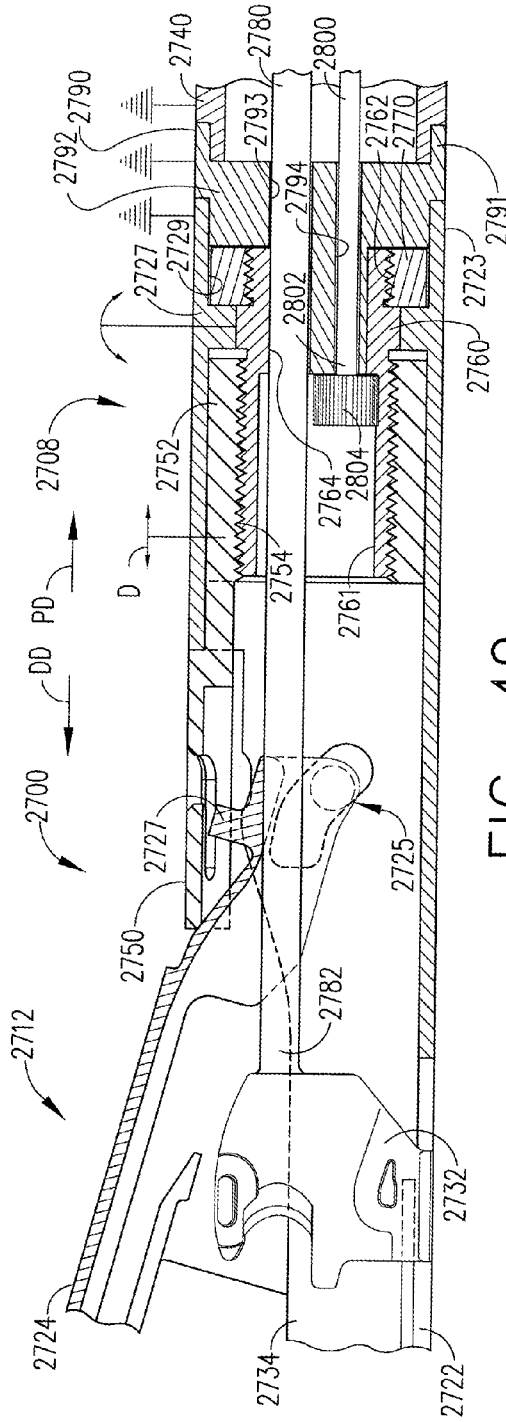


FIG. 49

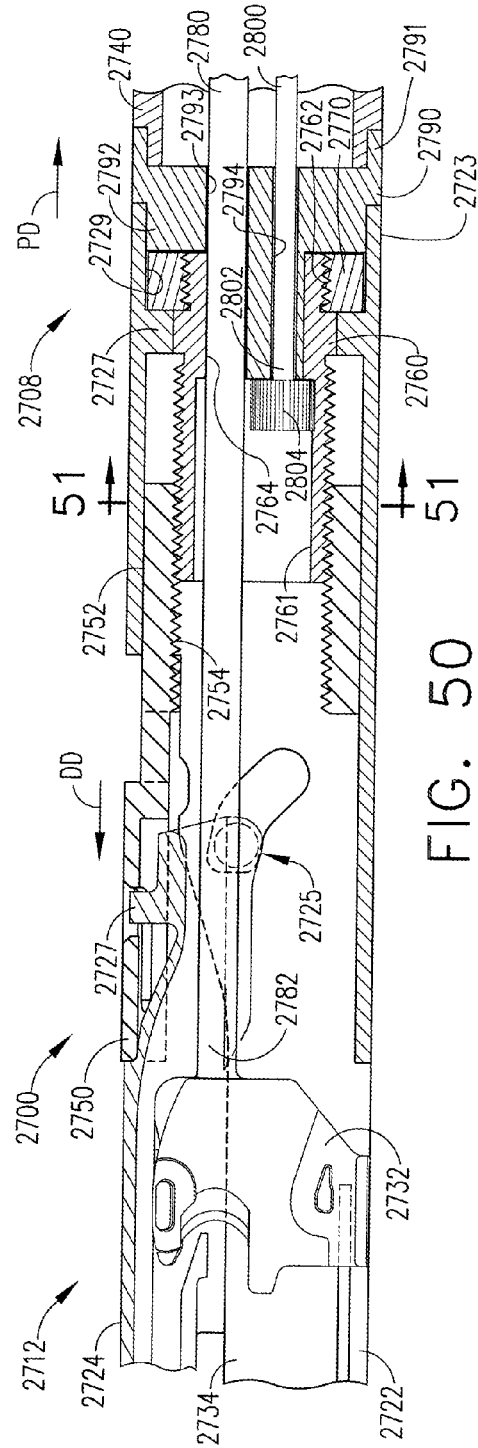


FIG. 50

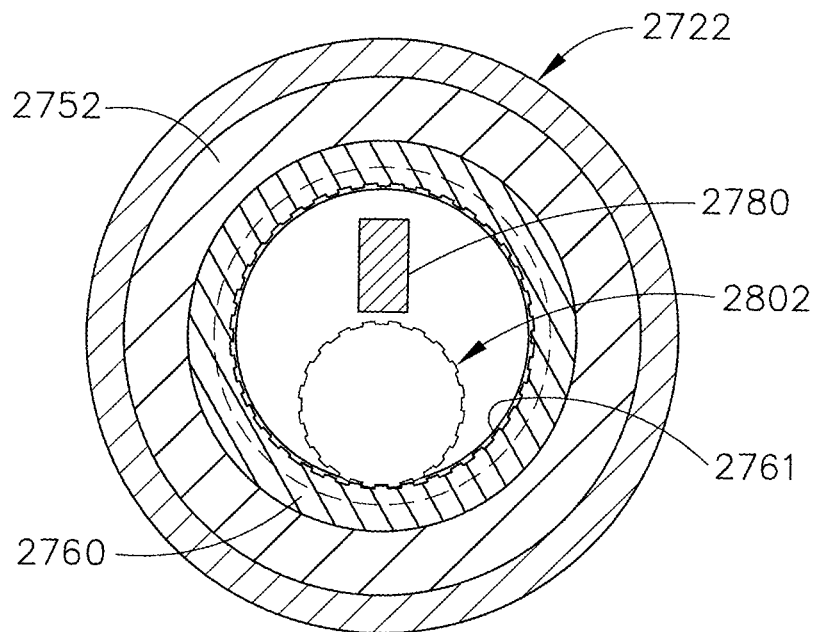


FIG. 51

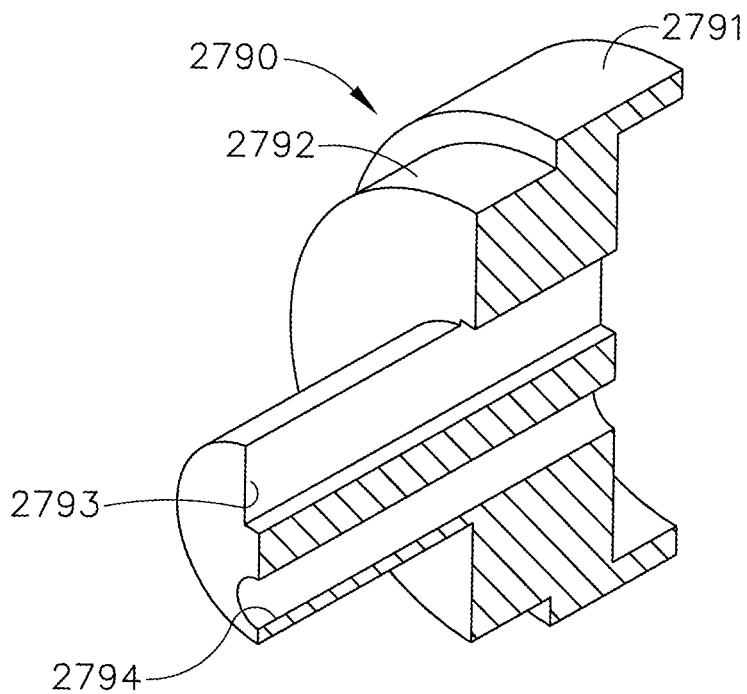


FIG. 52

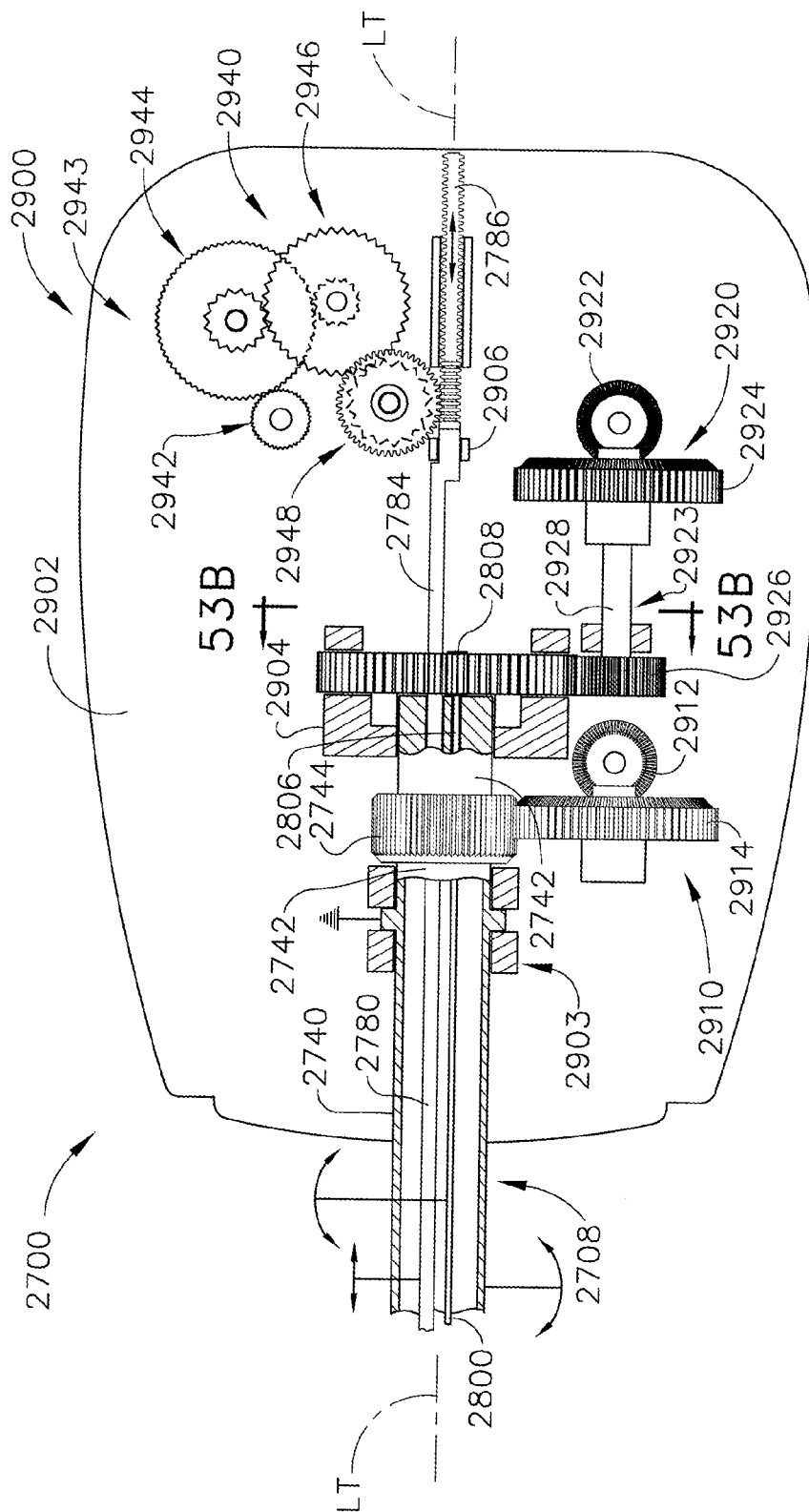


FIG. 53

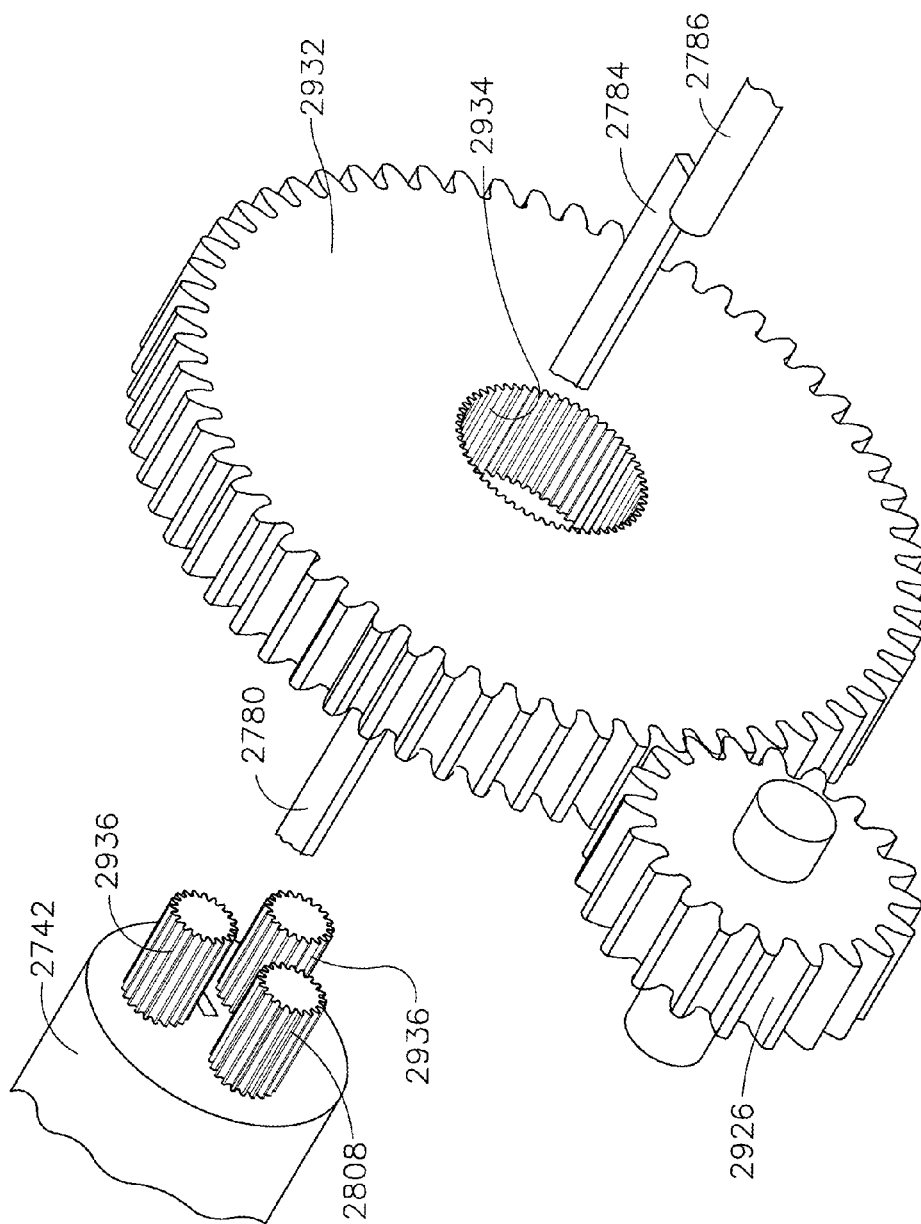


FIG. 53A

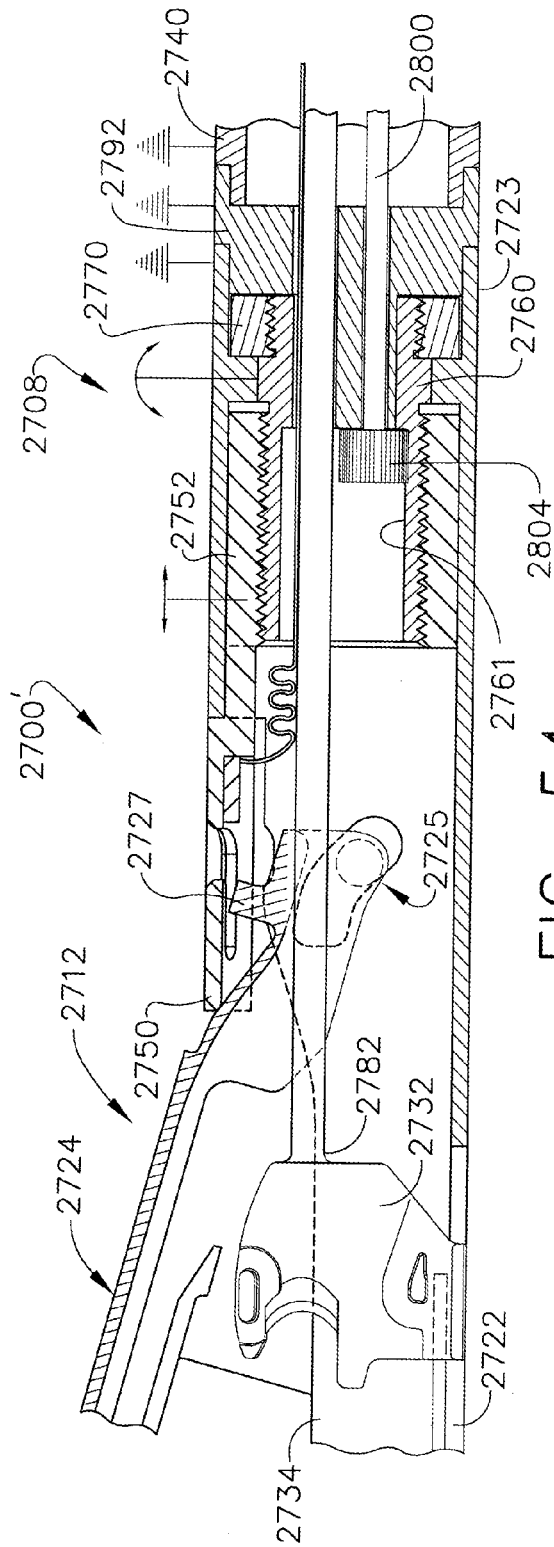


FIG. 54

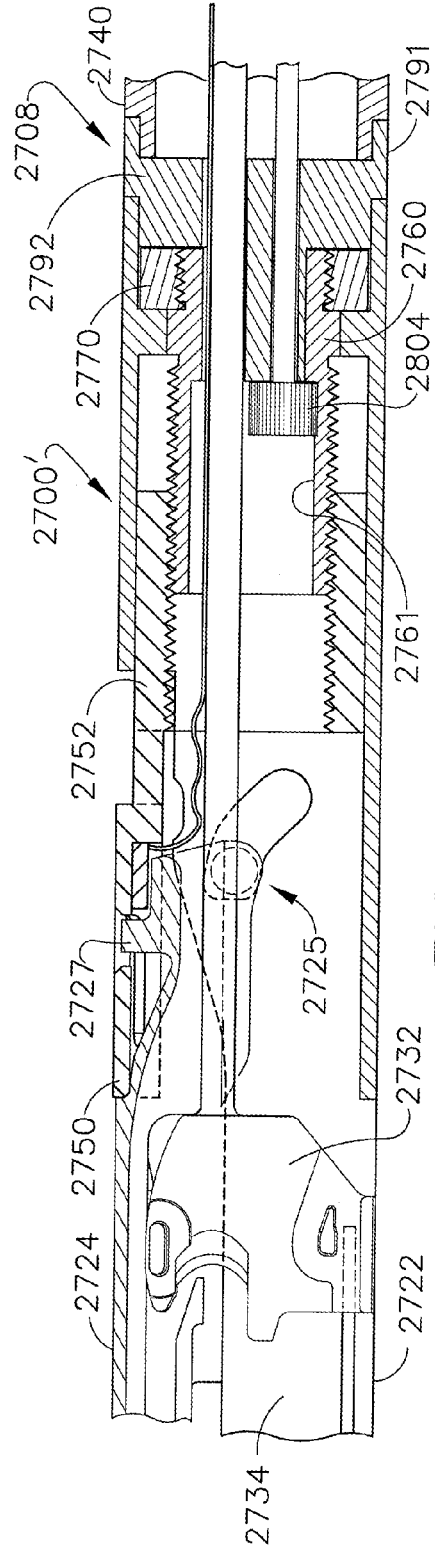


FIG. 55

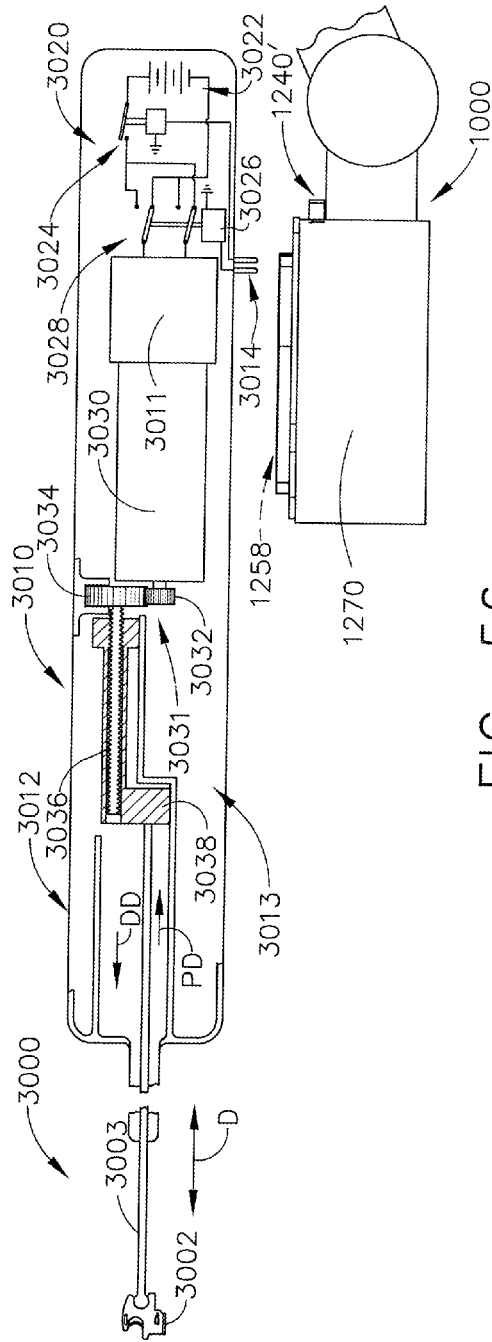


FIG. 56

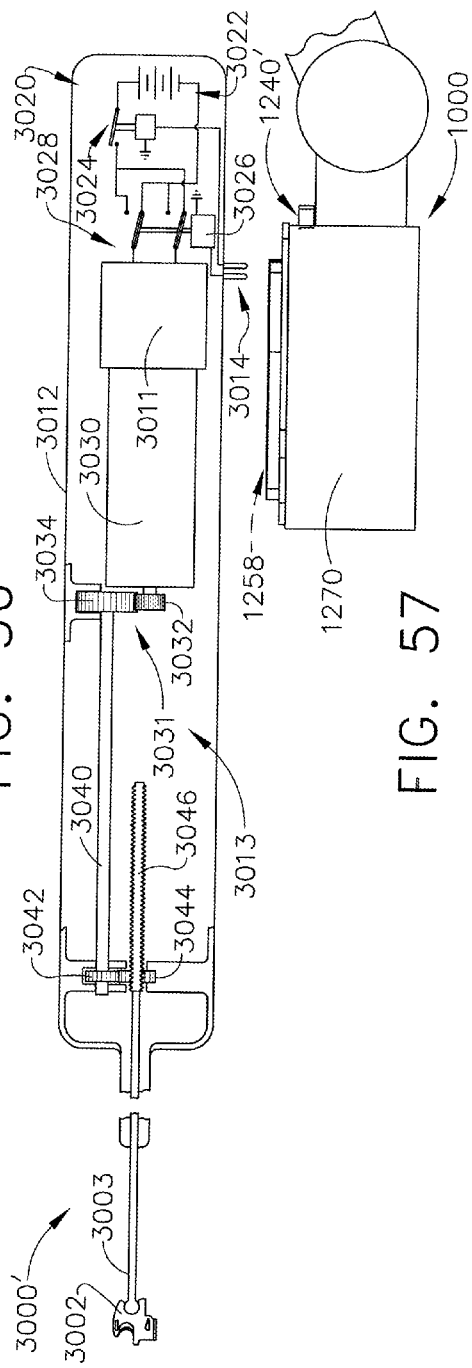


FIG. 57

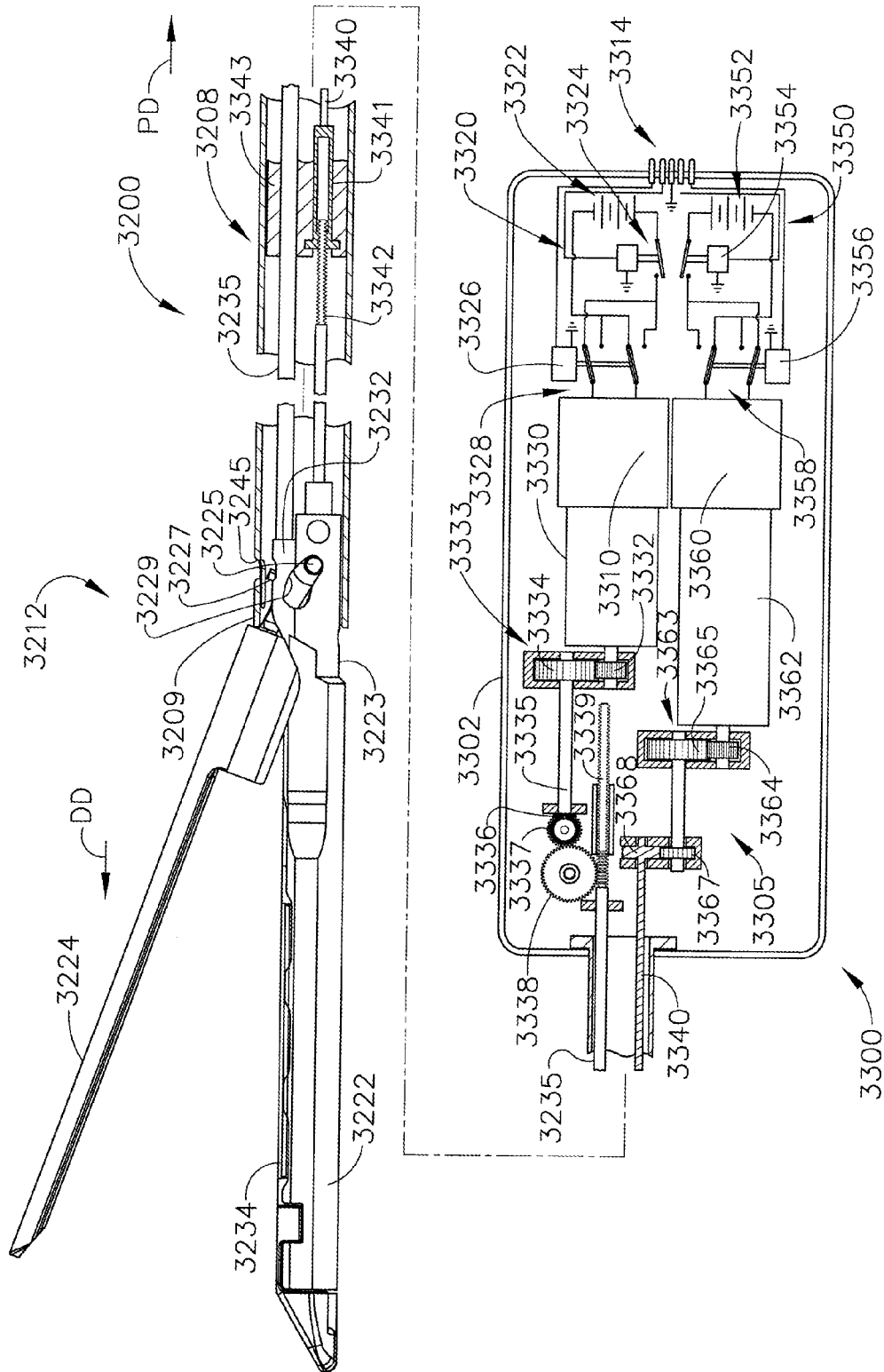


FIG. 58

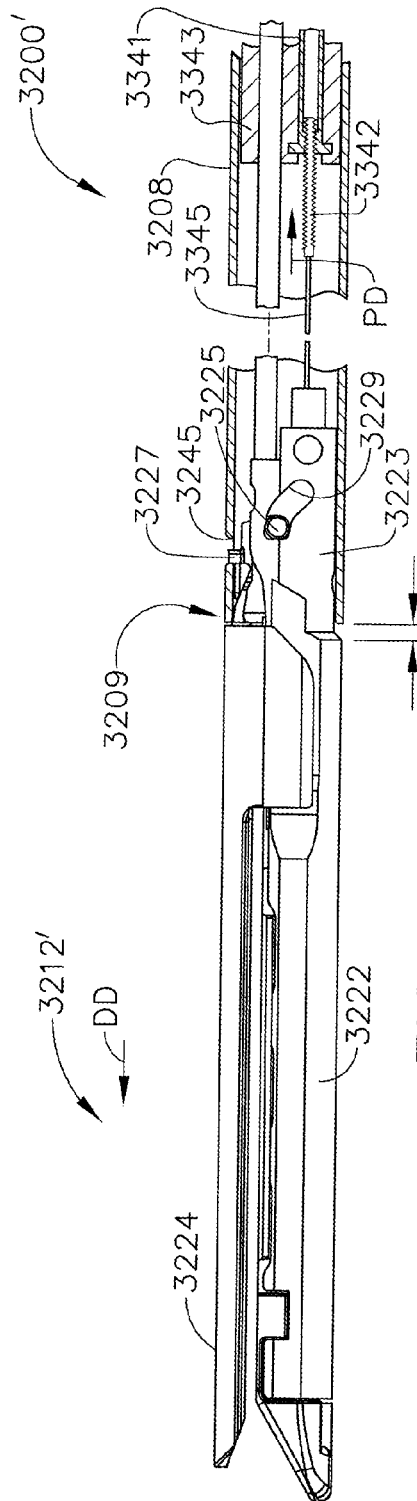


FIG. 59

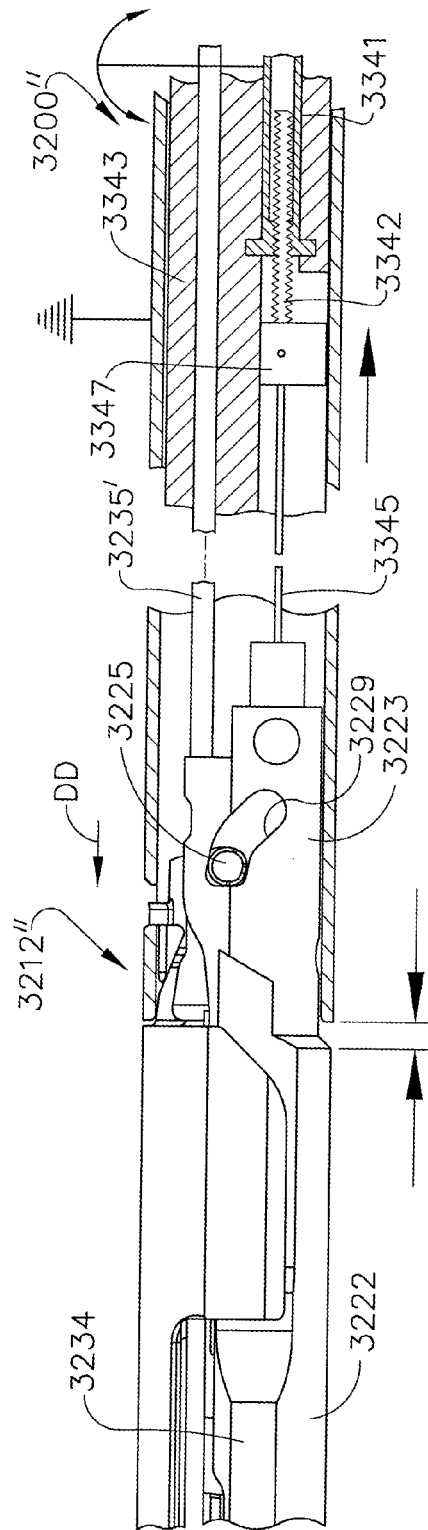


FIG. 60

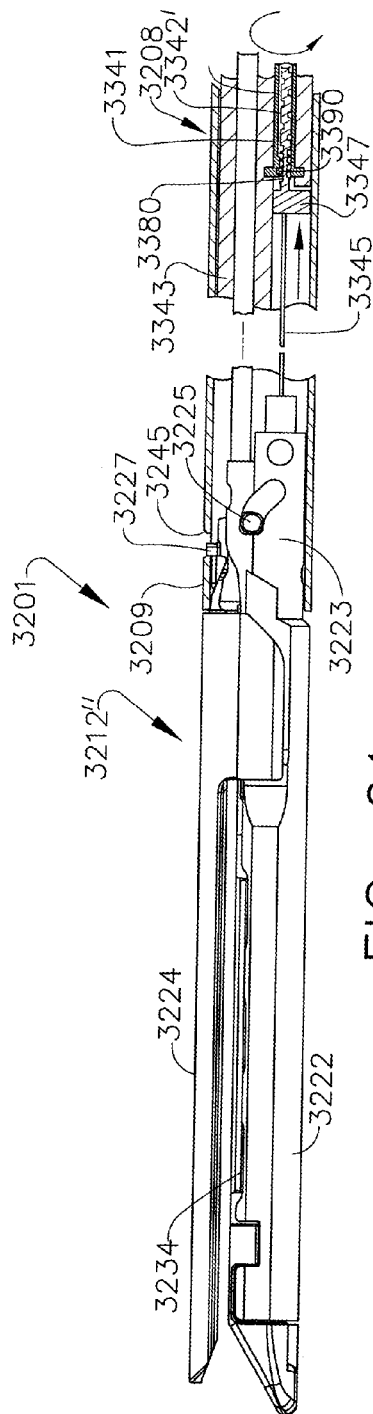


FIG. 19

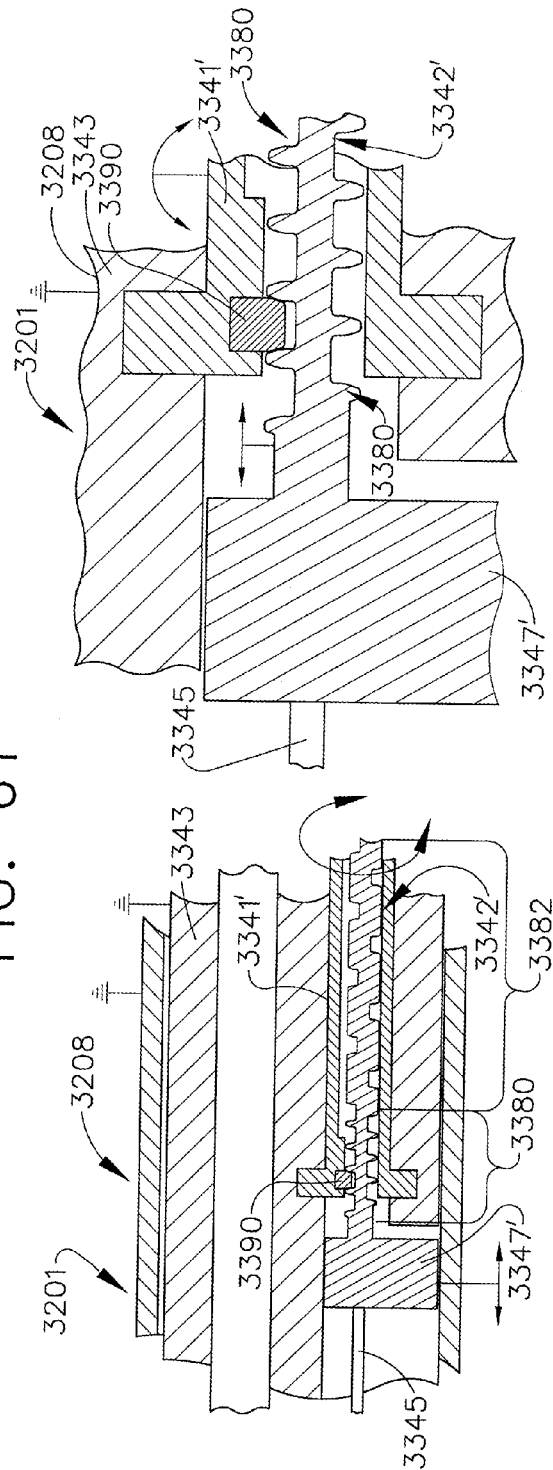


FIG. 62

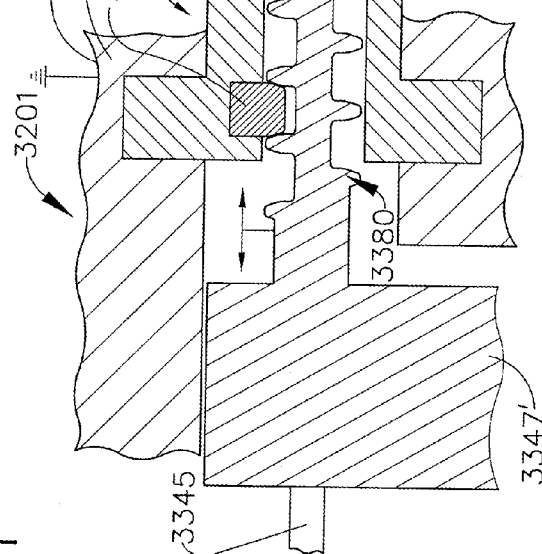


FIG. 63

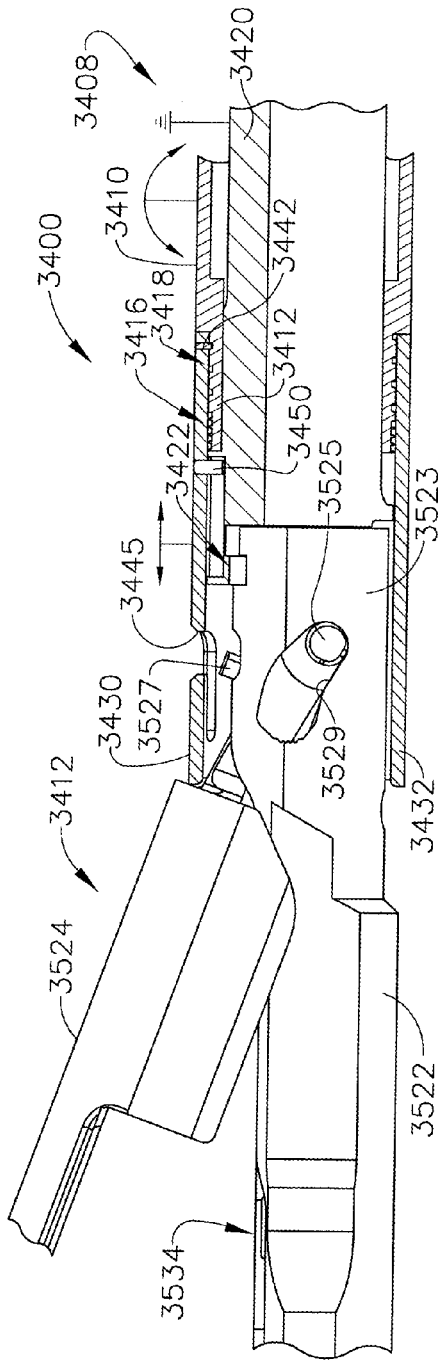


FIG. 64

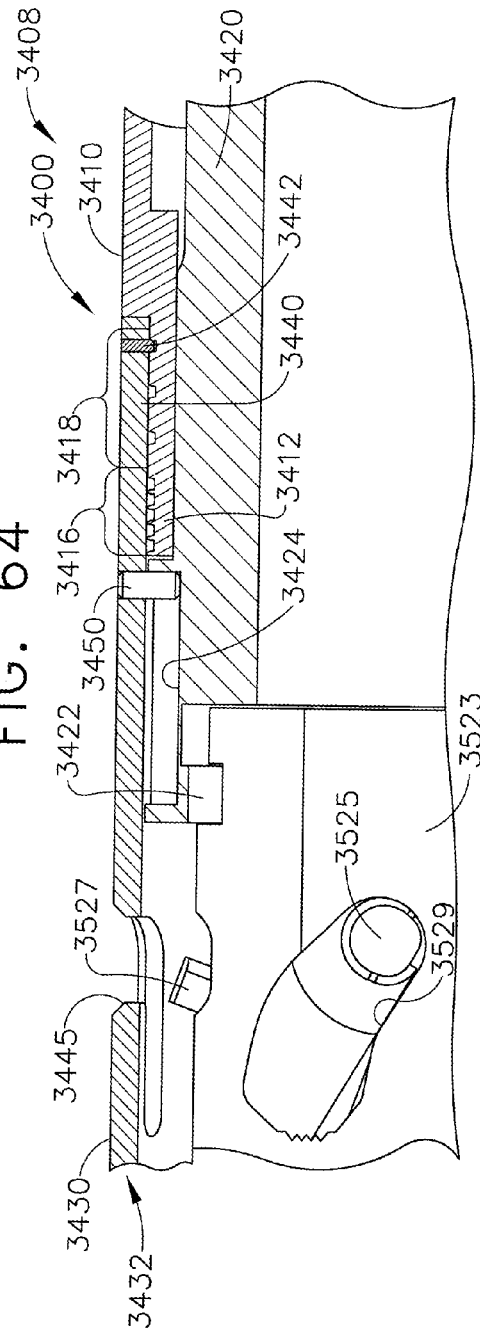


FIG. 65

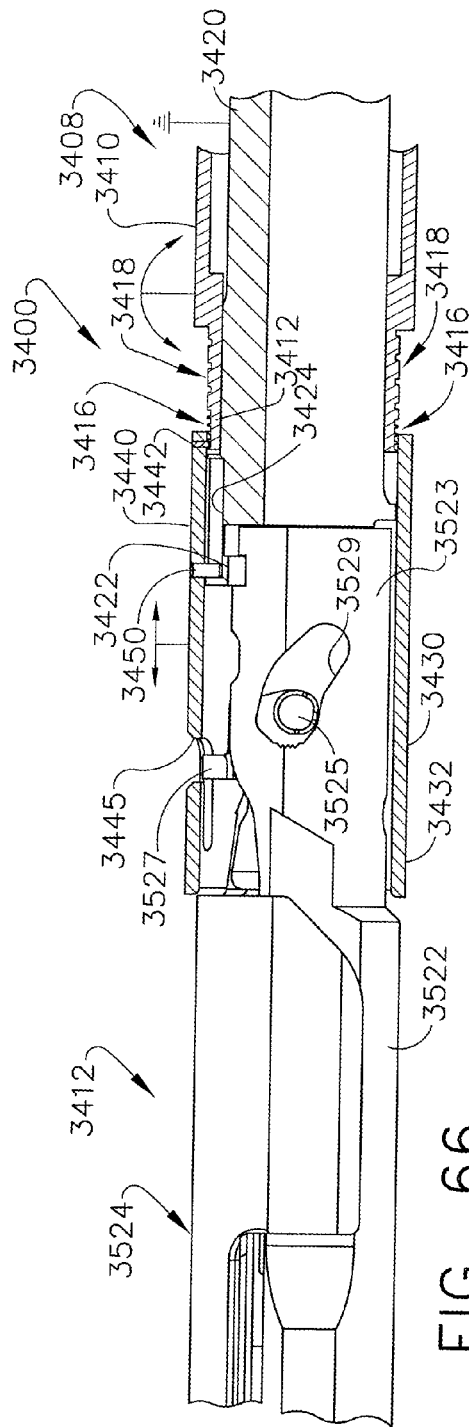


FIG. 66

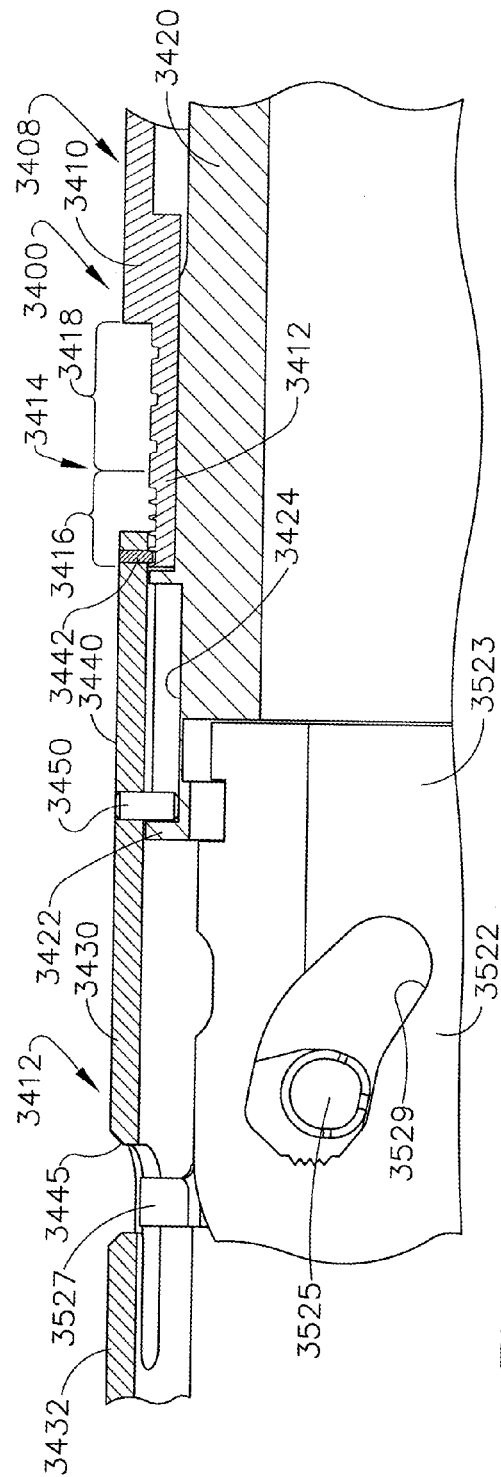


FIG. 67

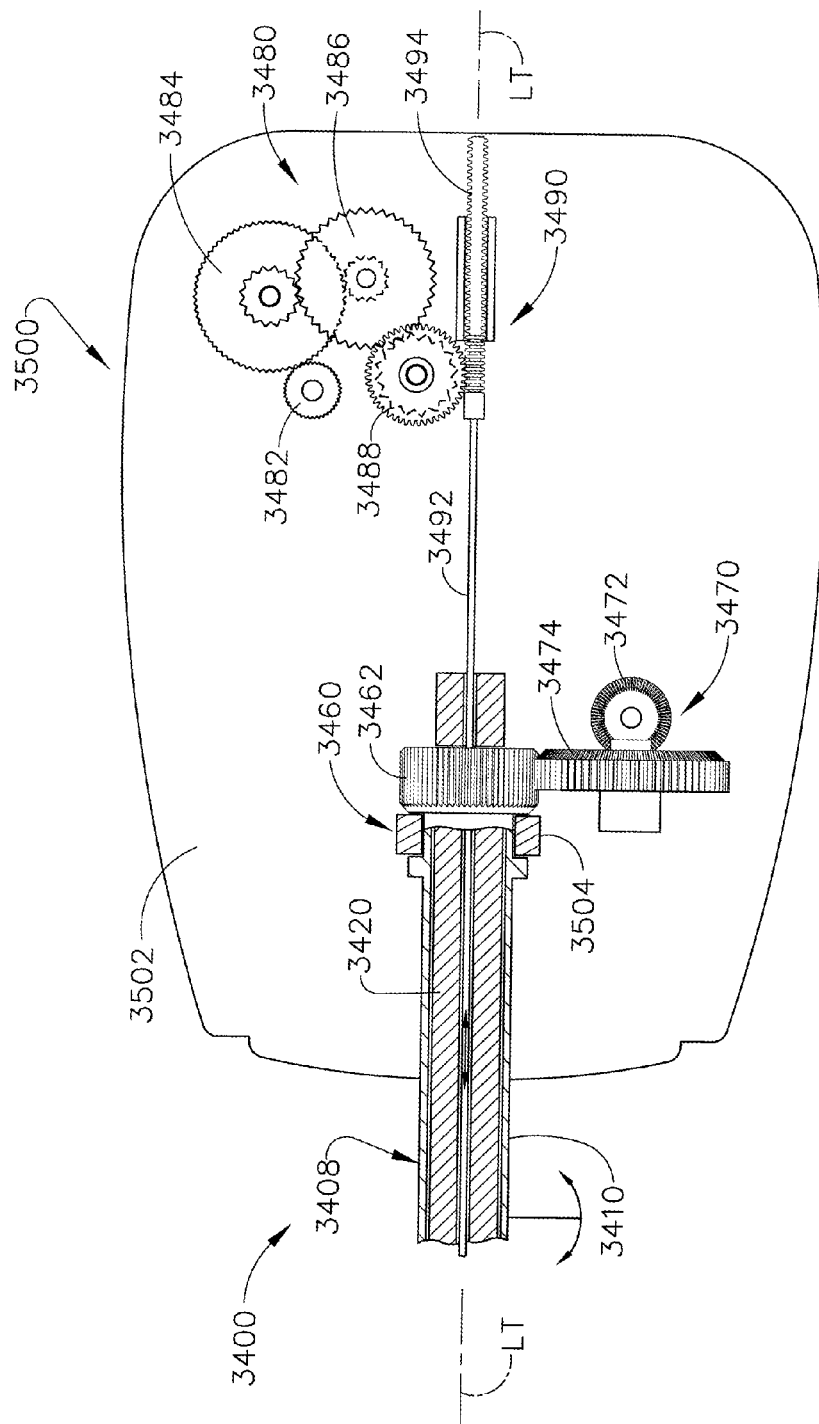
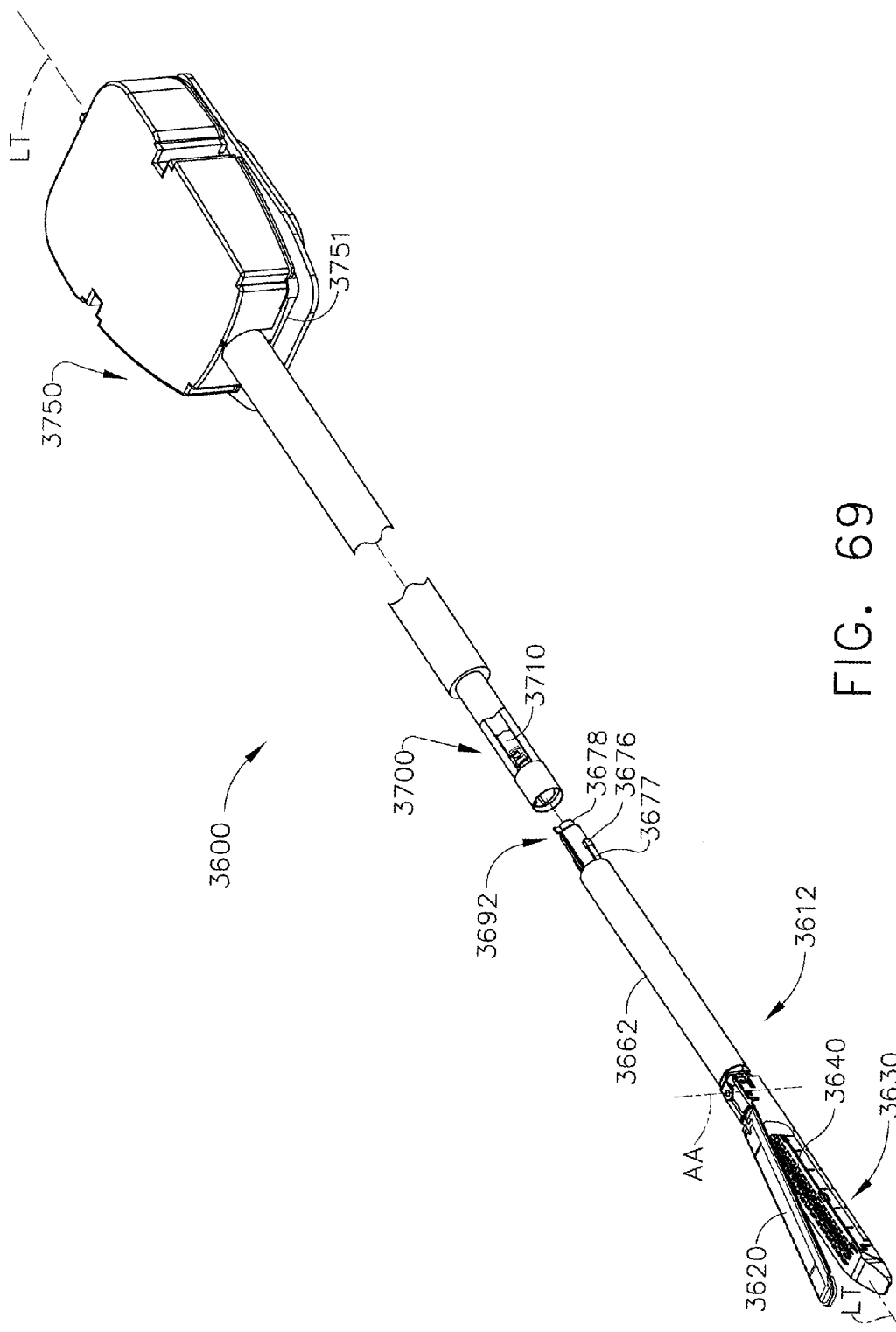


FIG. 68



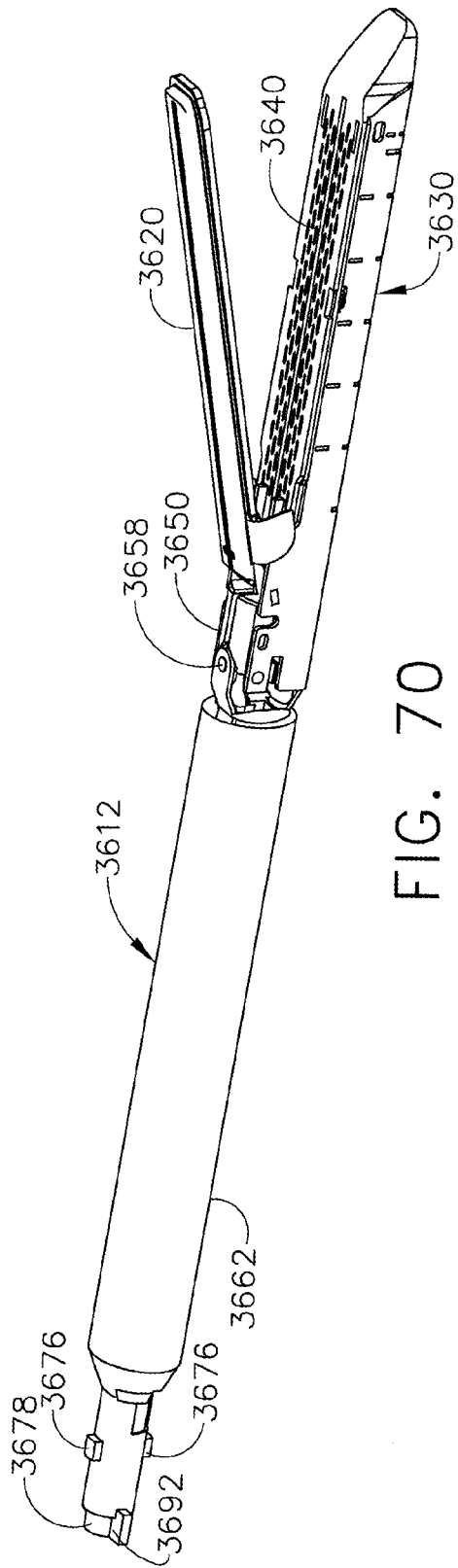


FIG. 70

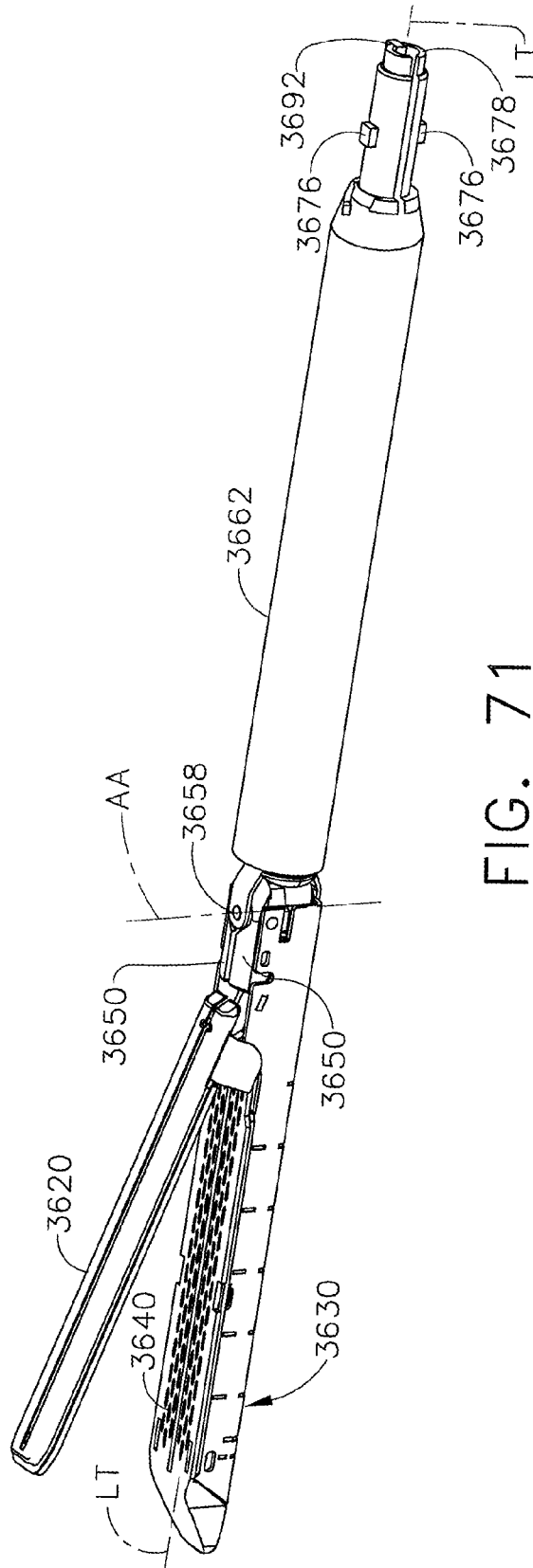


FIG. 71

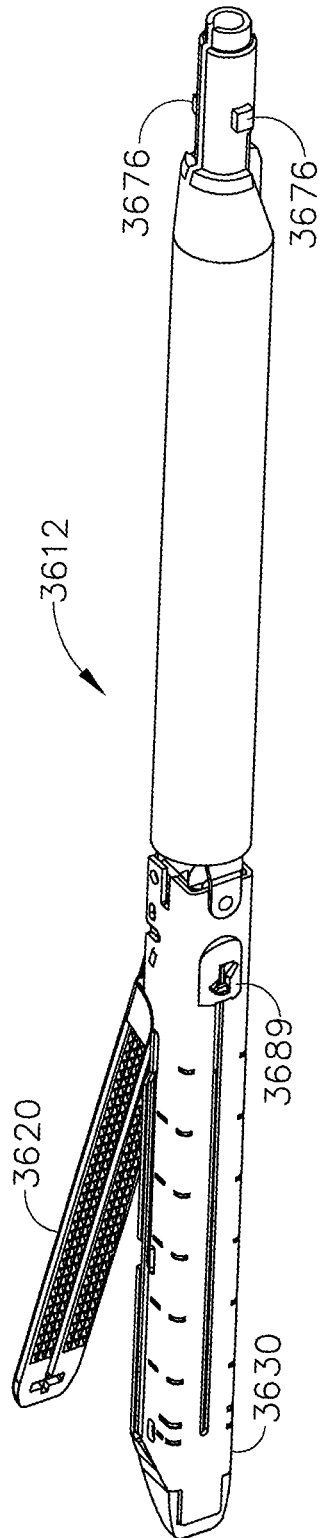


FIG. 72

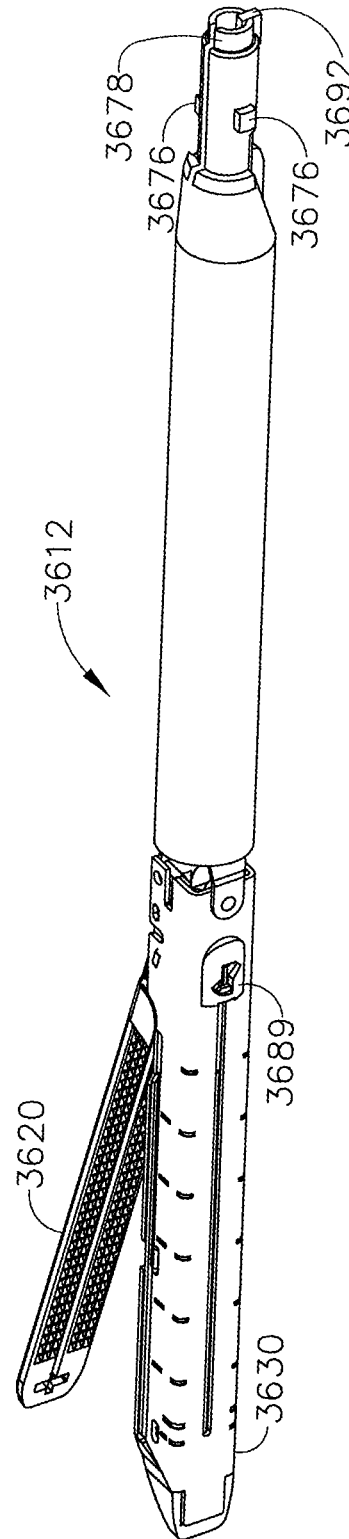


FIG. 73

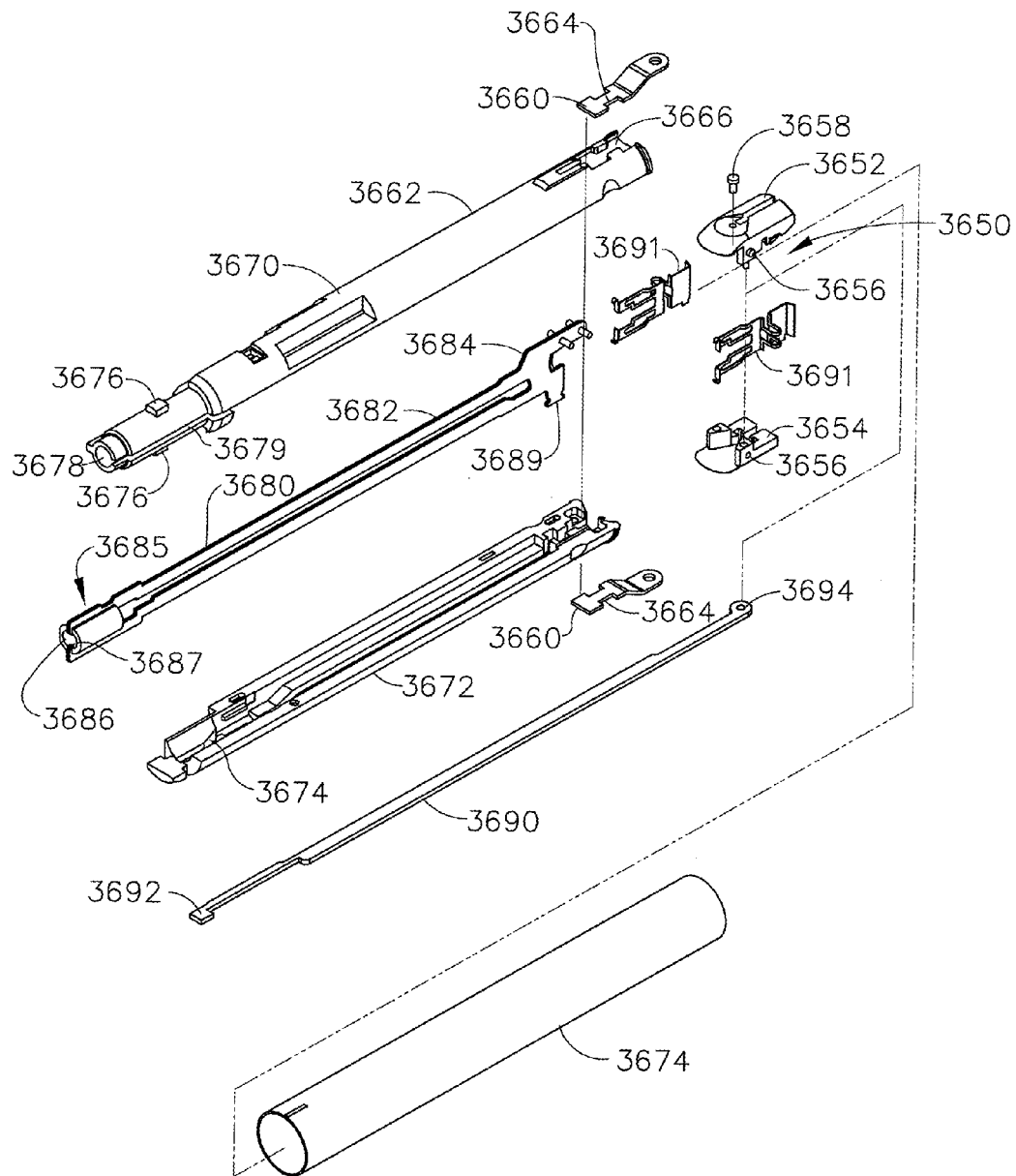
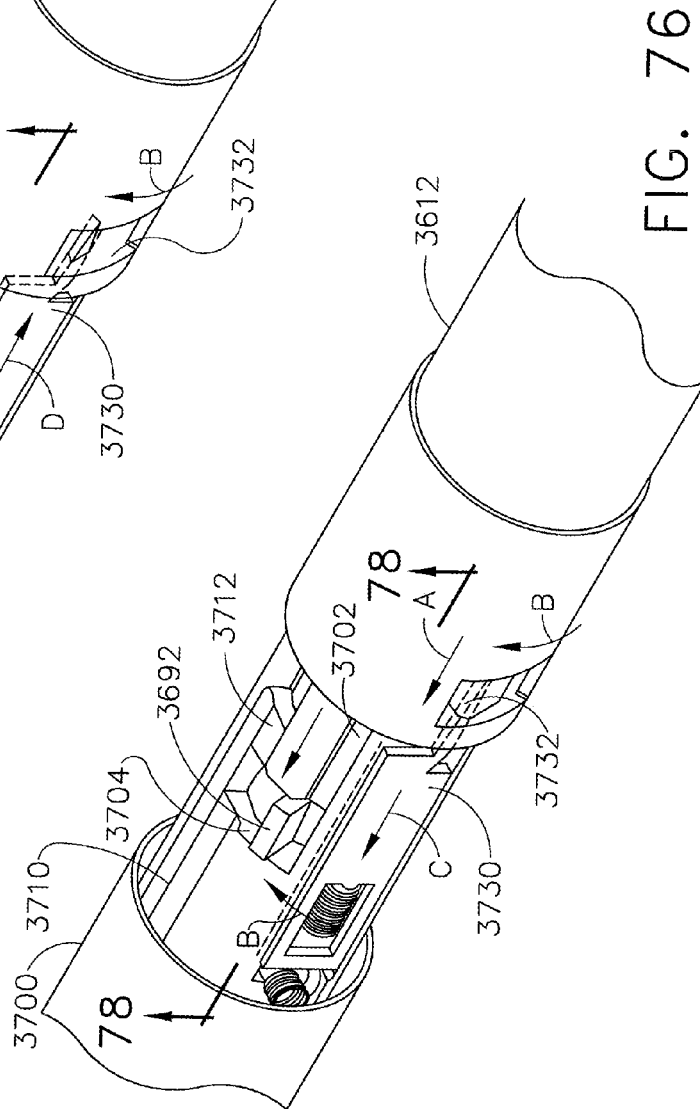
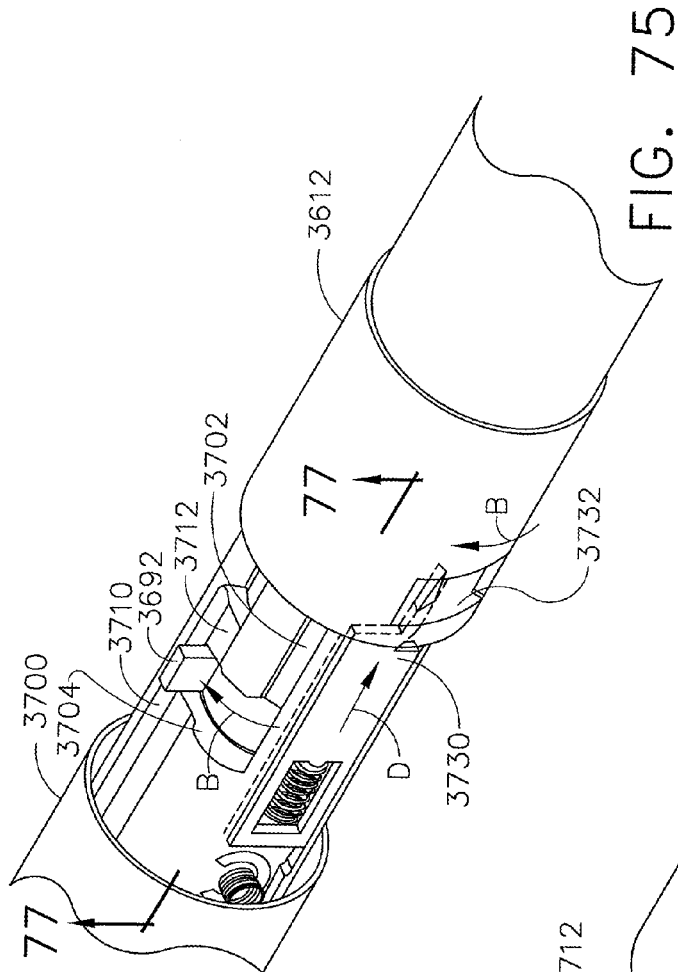


FIG. 74



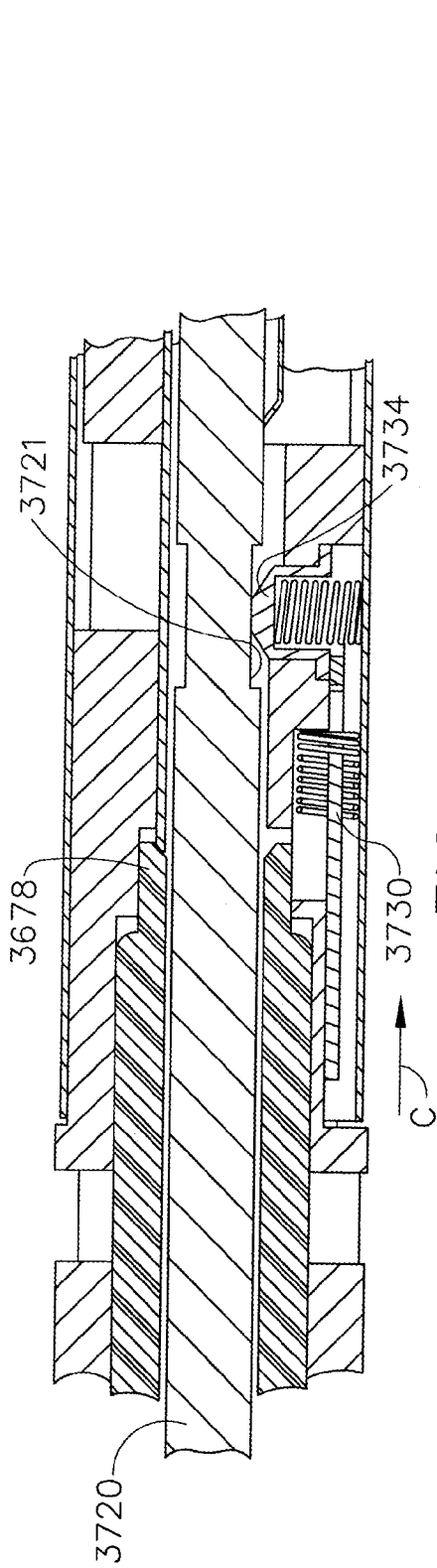


FIG. 77

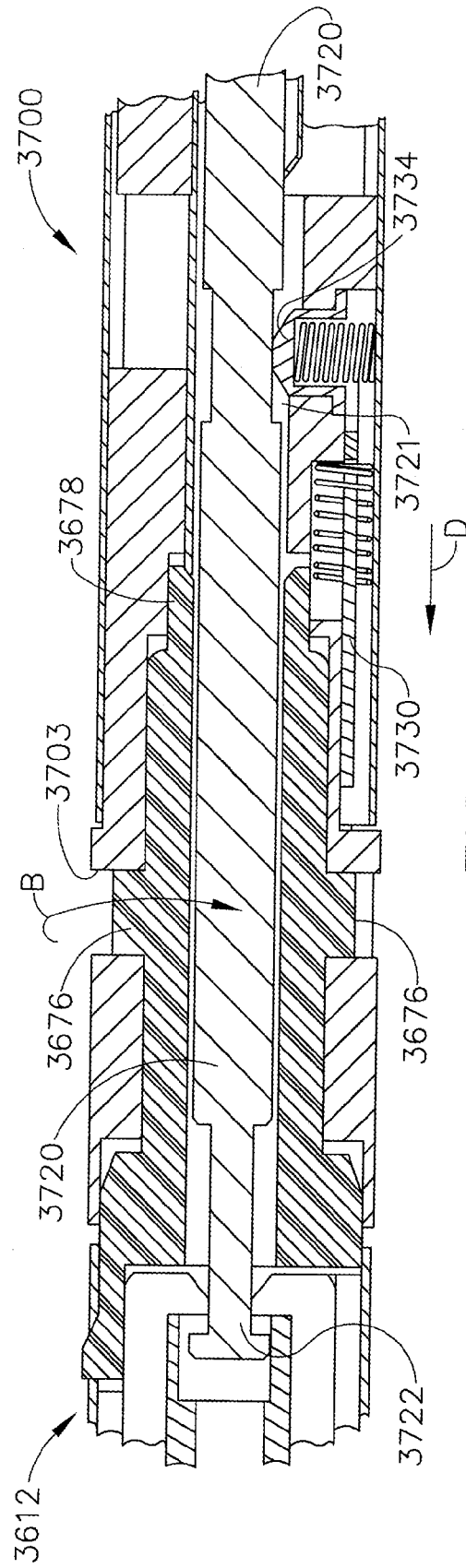
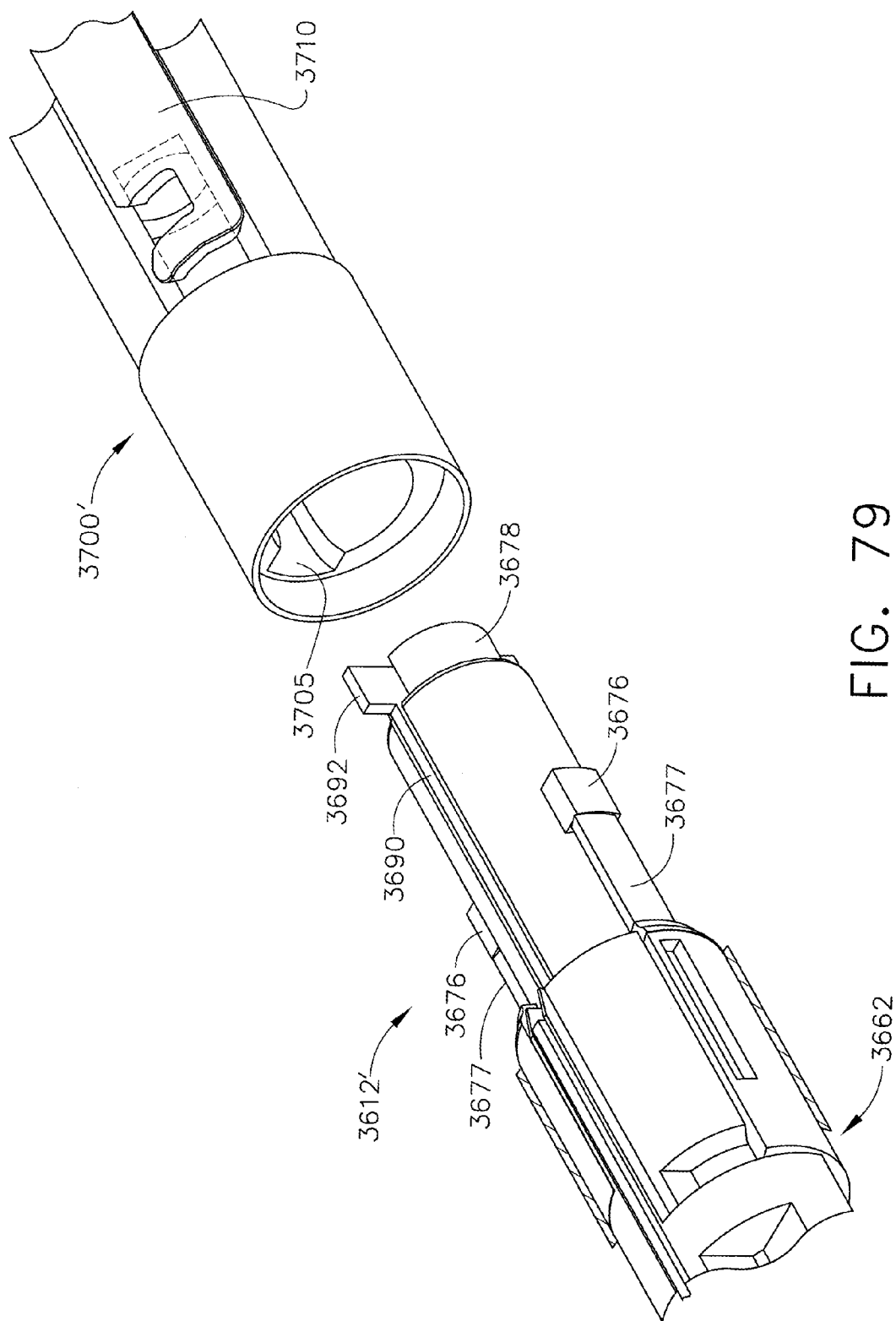


FIG. 78



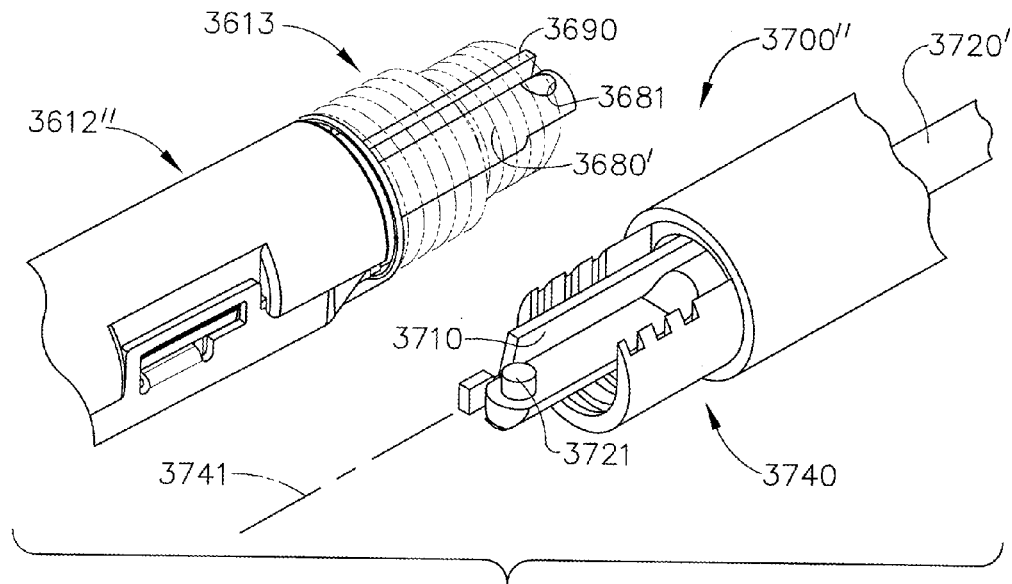


FIG. 80

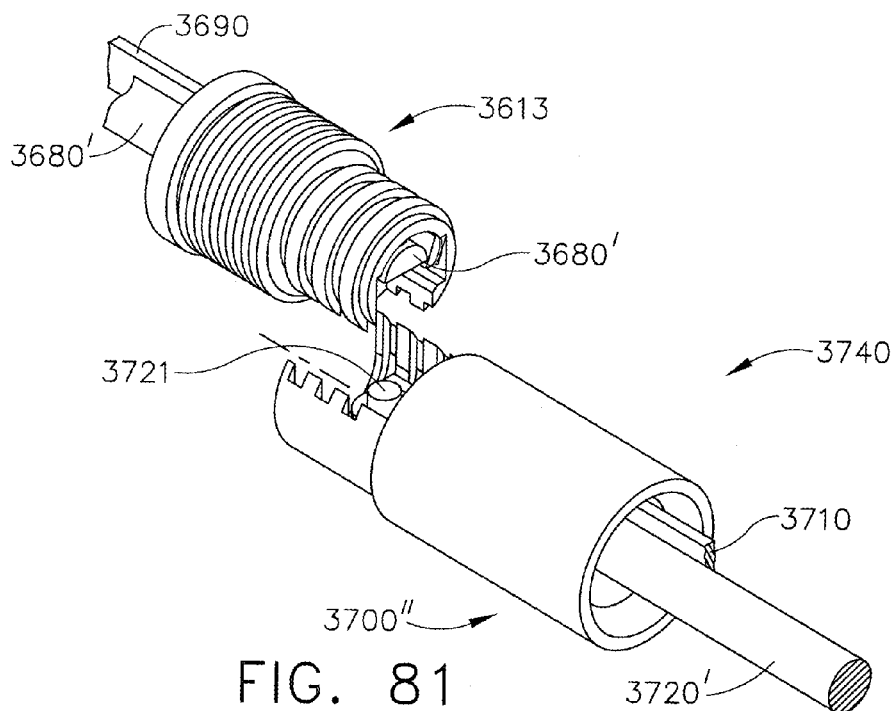


FIG. 81

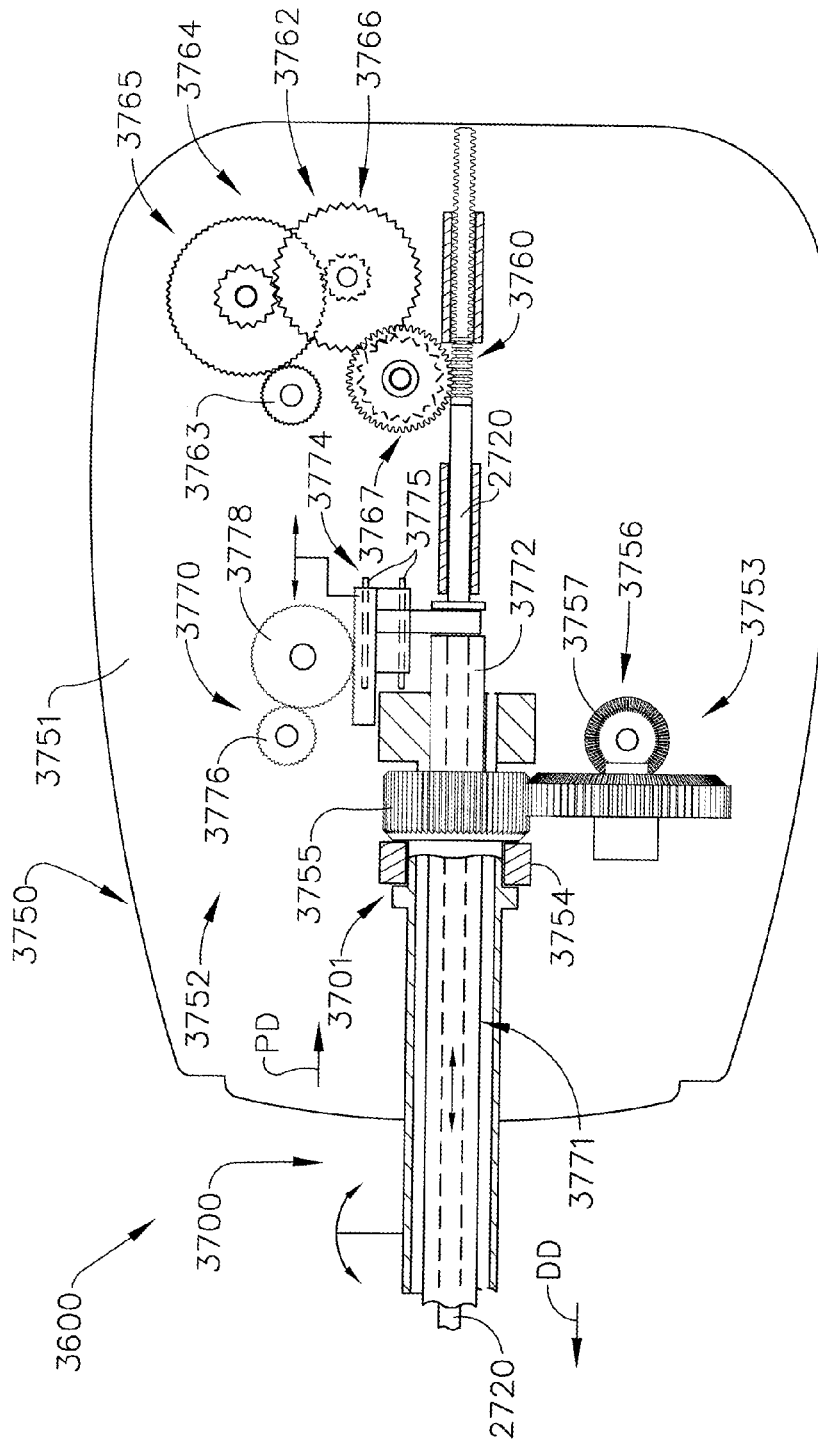


FIG. 82

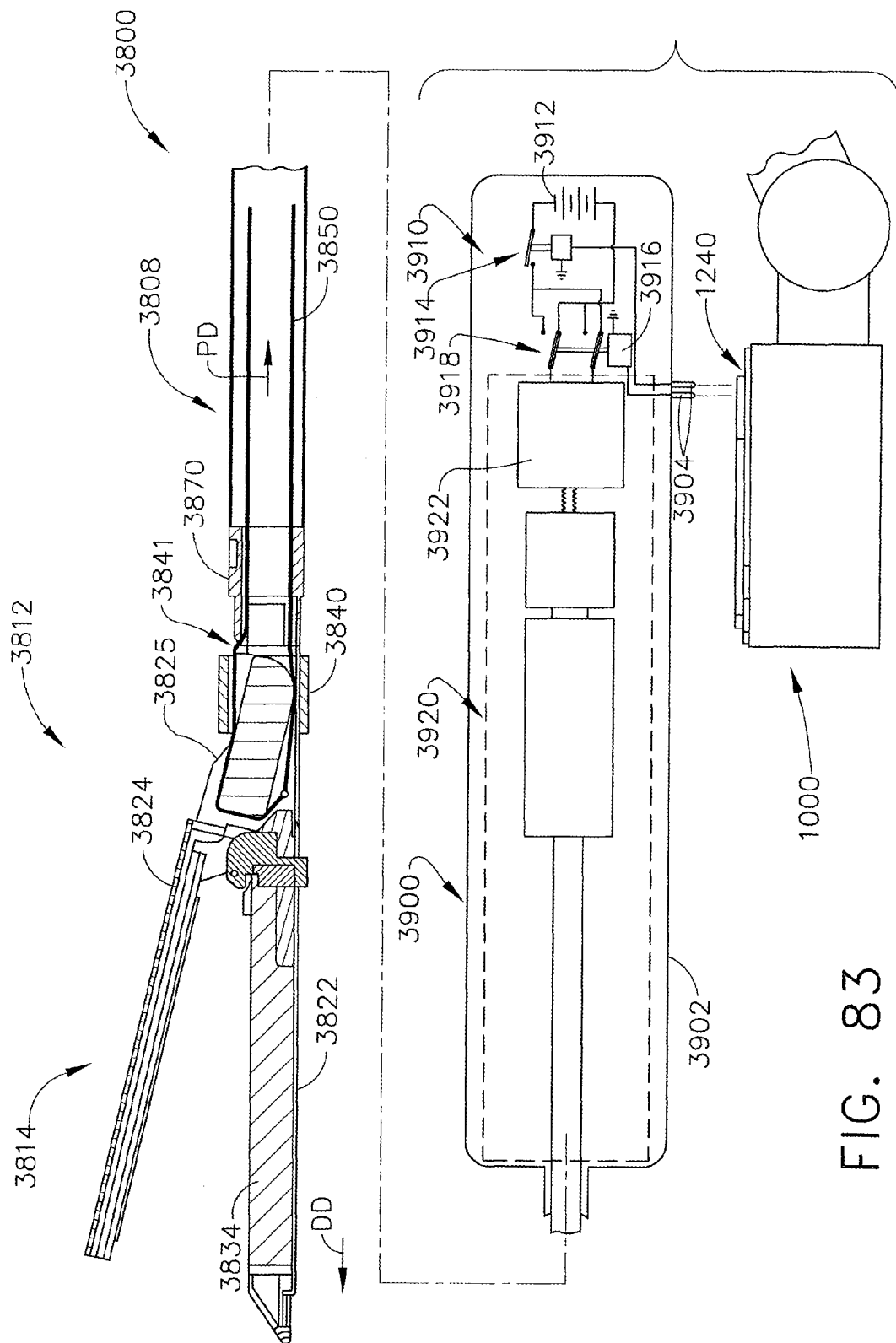
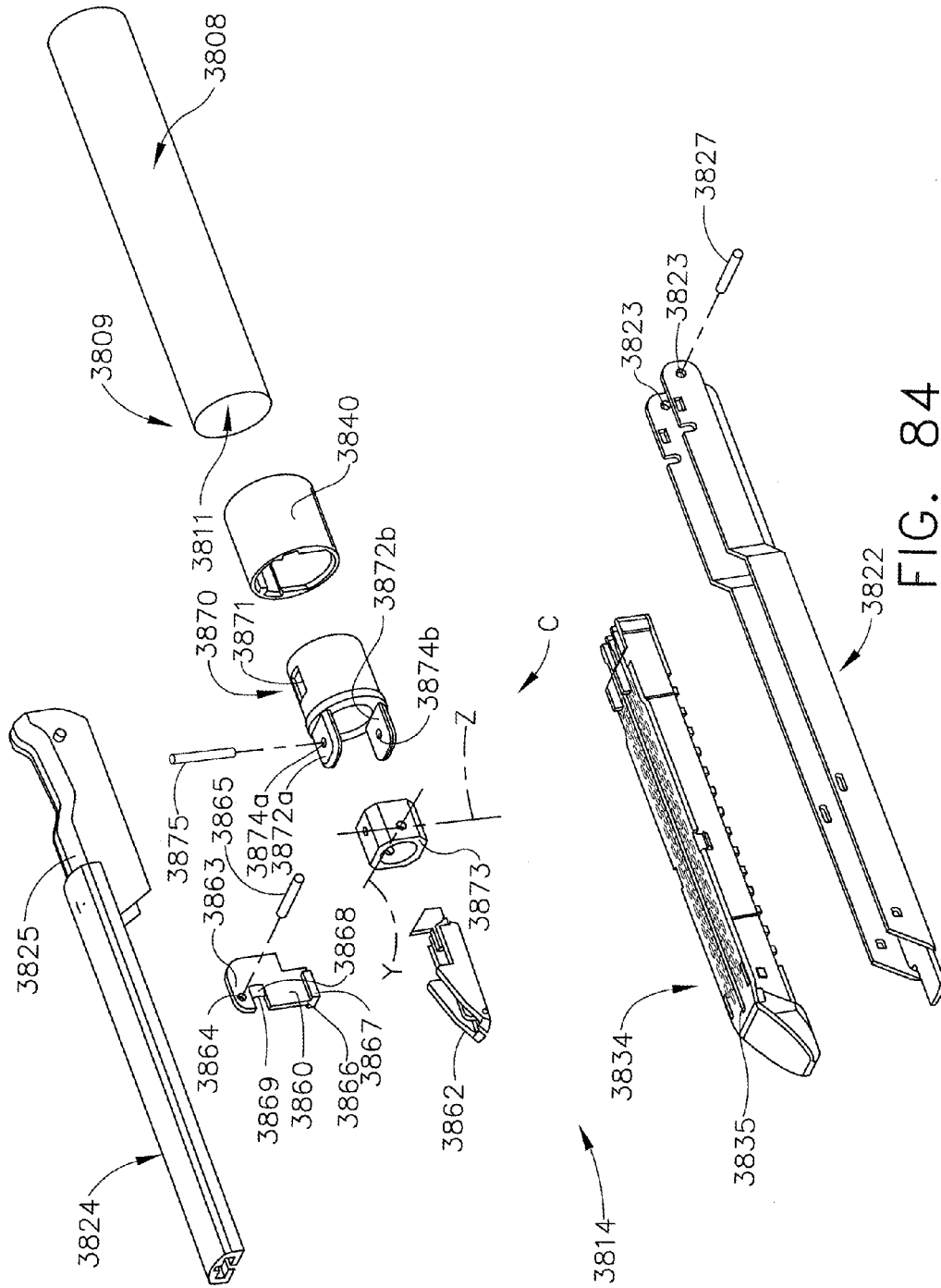
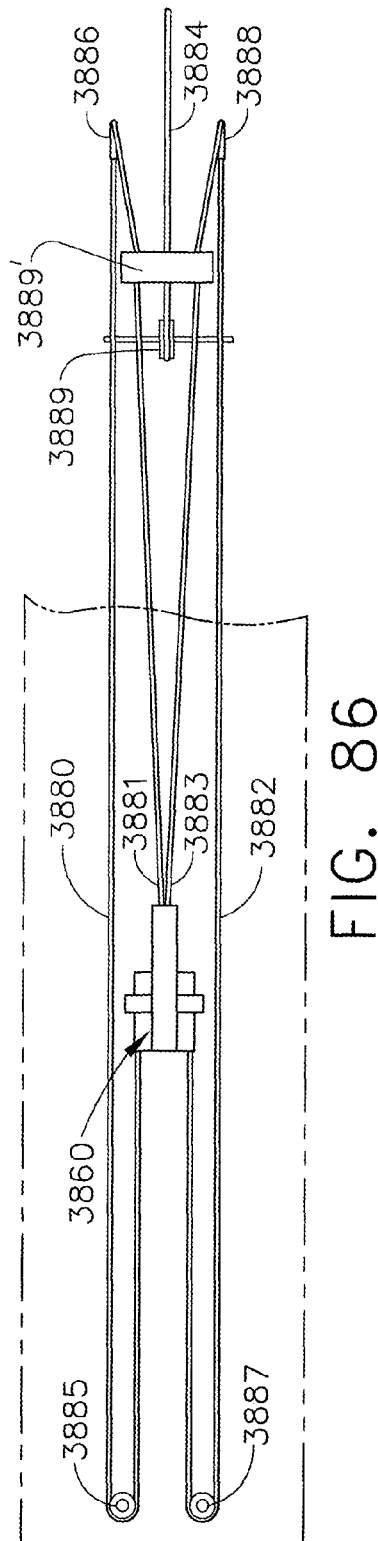
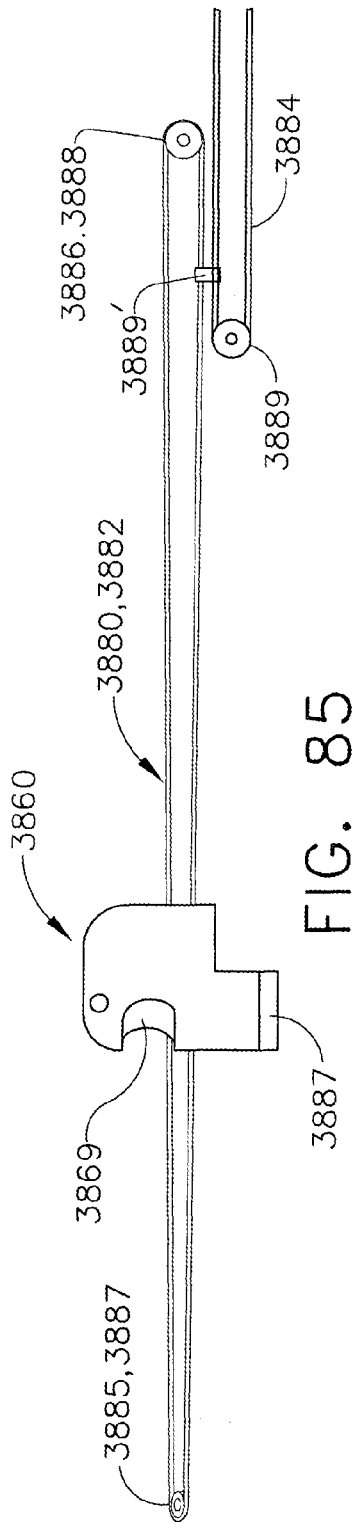


FIG. 83





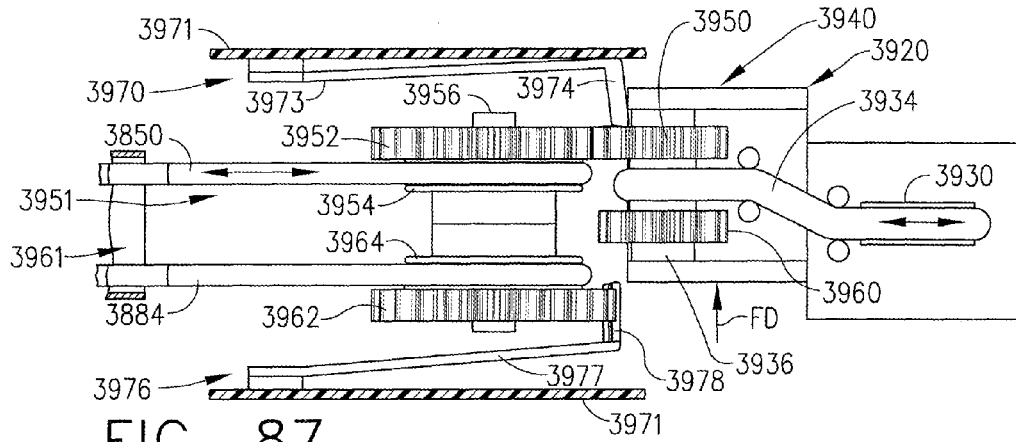


FIG. 87

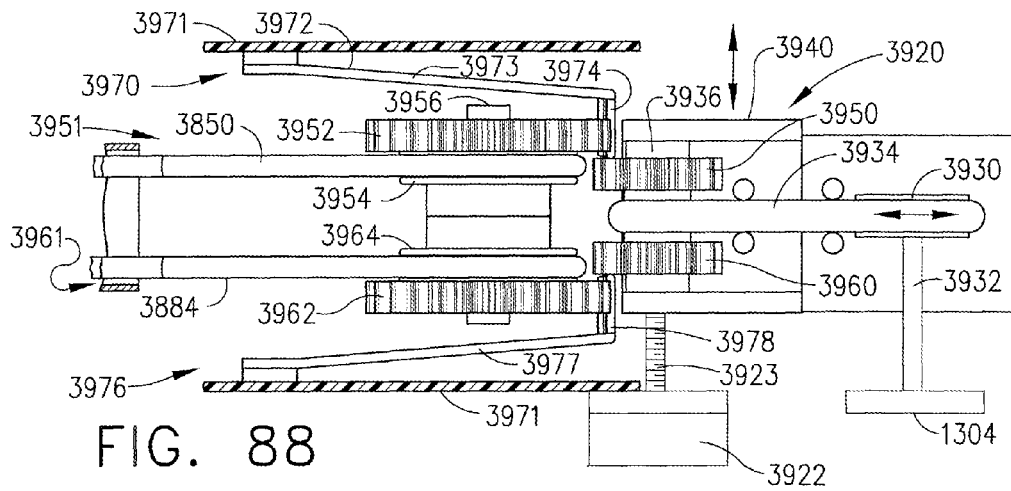


FIG. 88

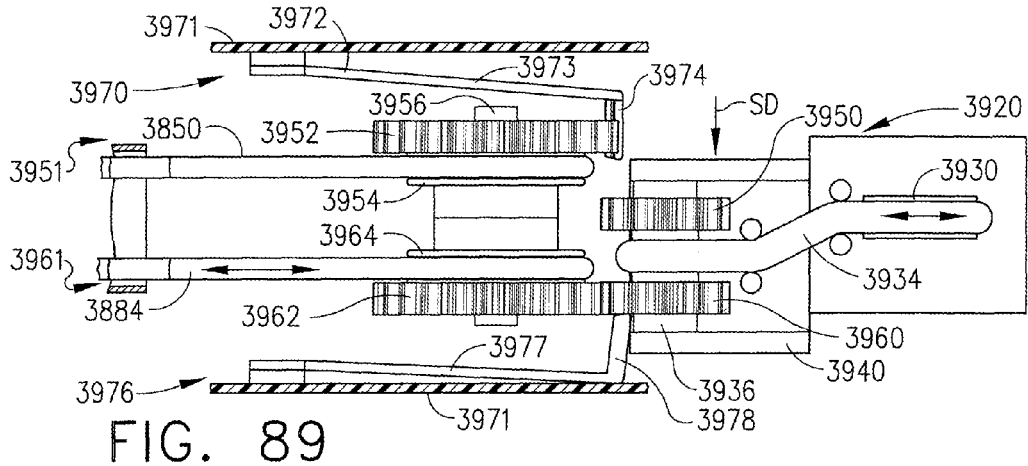


FIG. 89

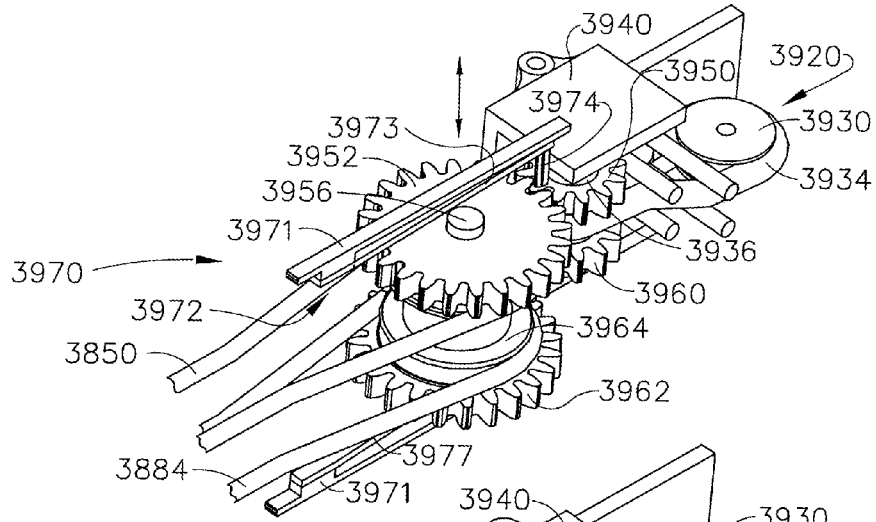


FIG. 90

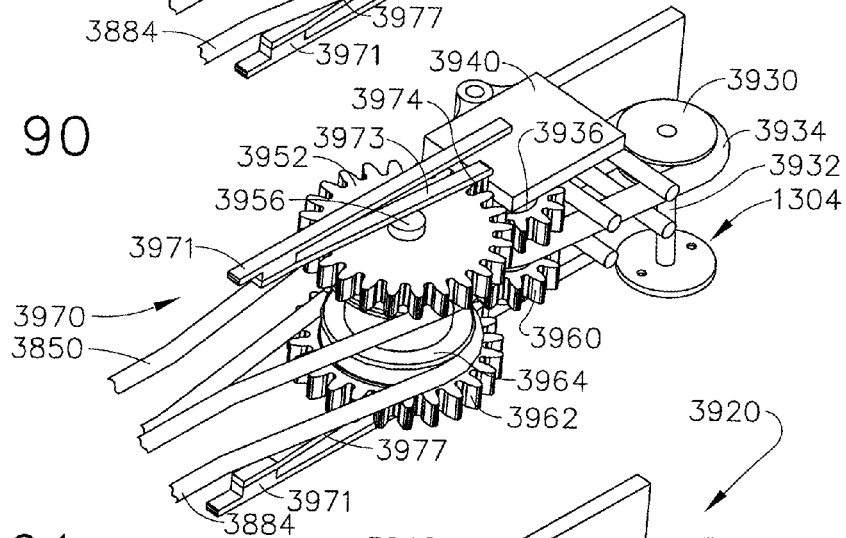


FIG. 91

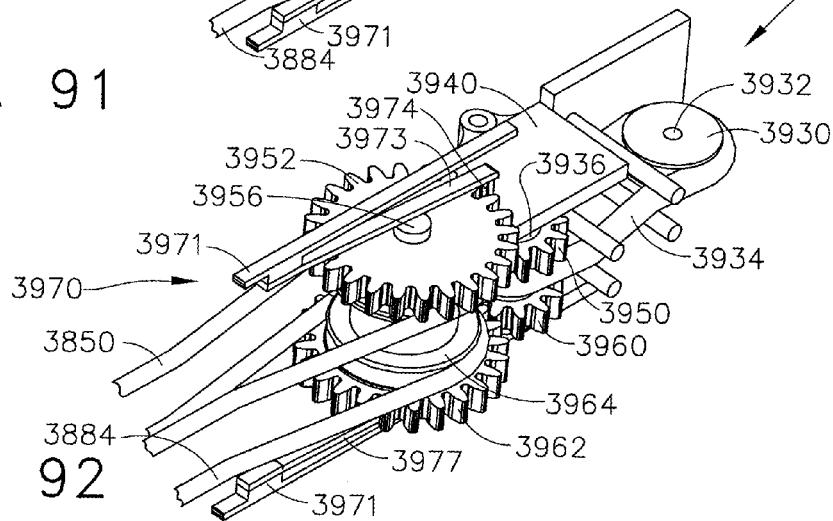
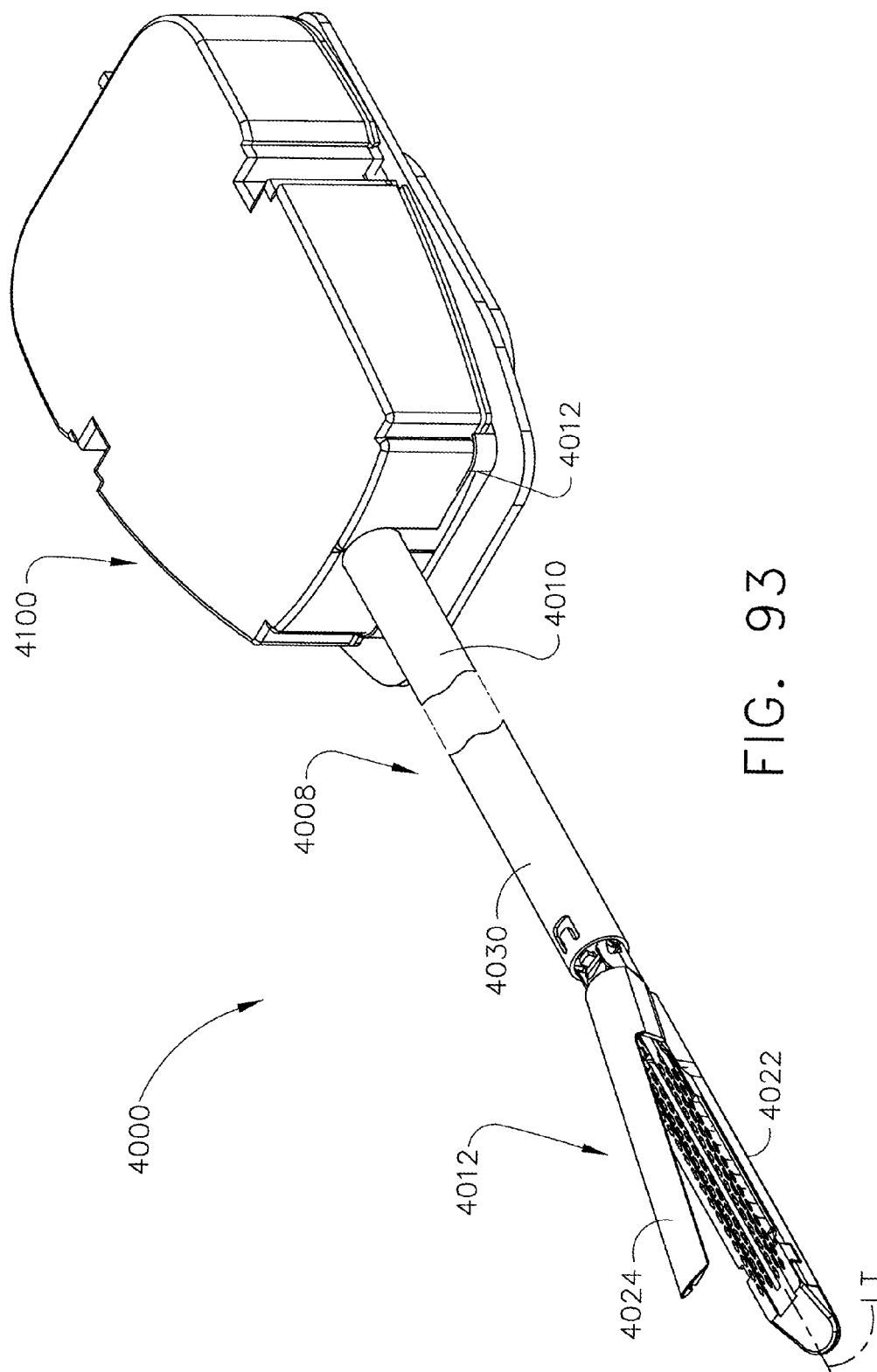


FIG. 92



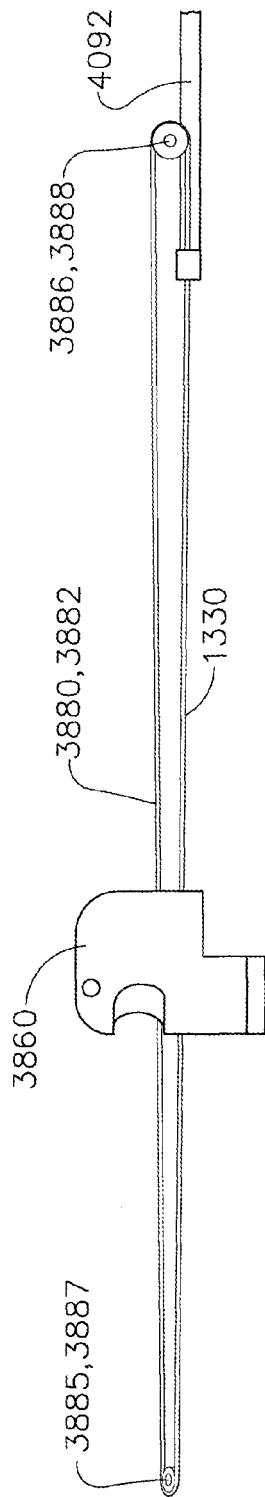


FIG. 94

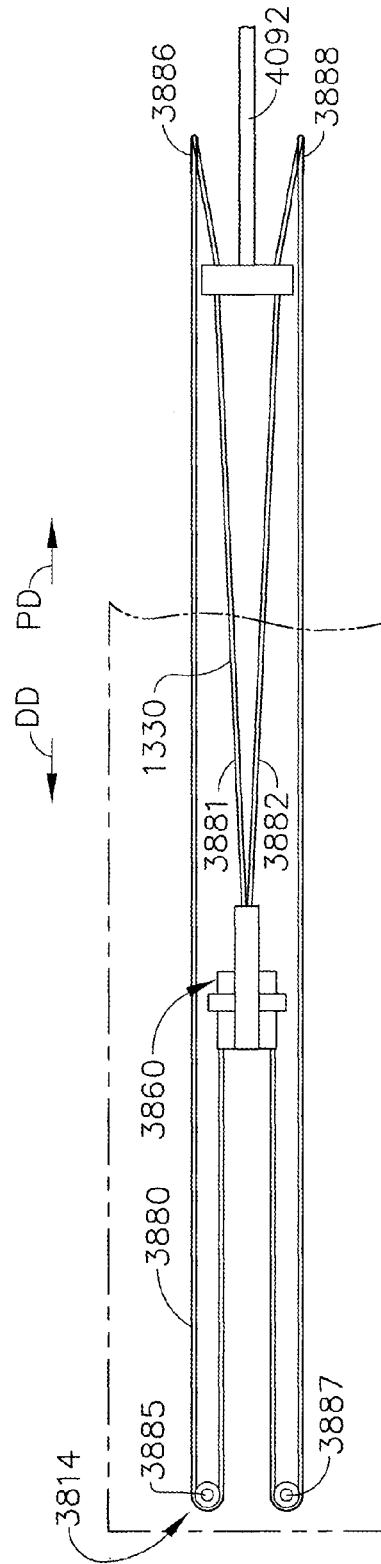


FIG. 95

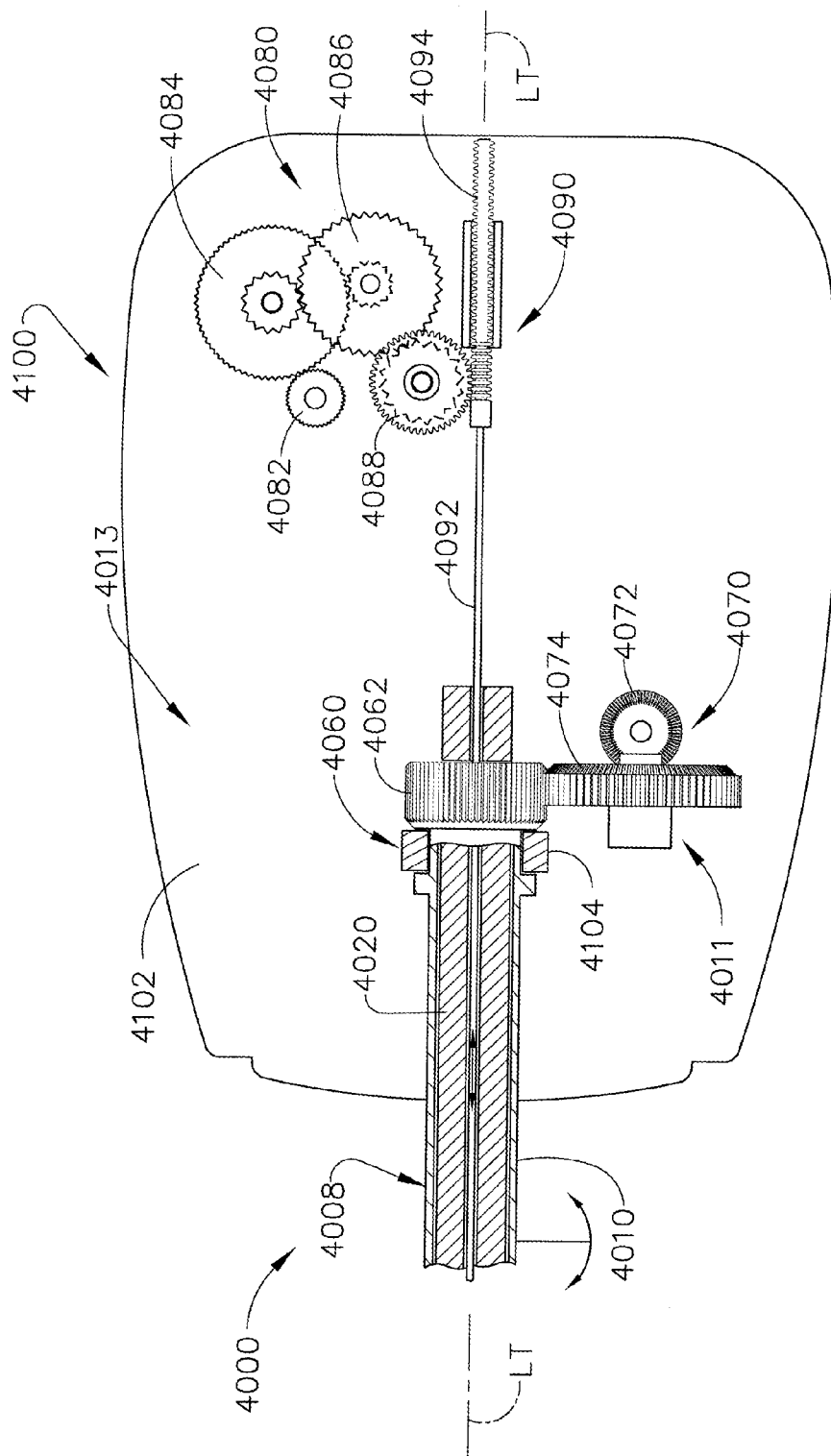


FIG. 96

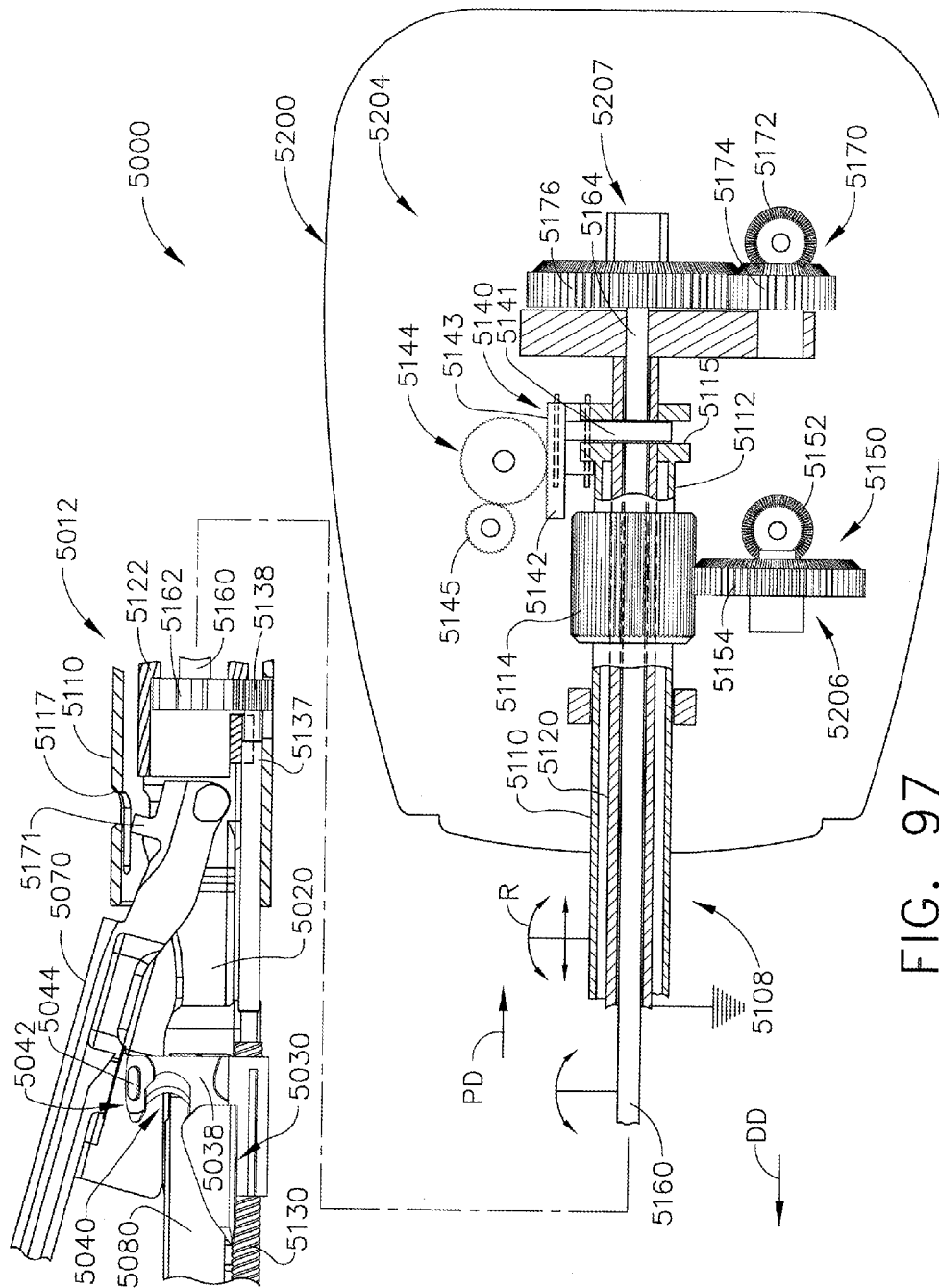
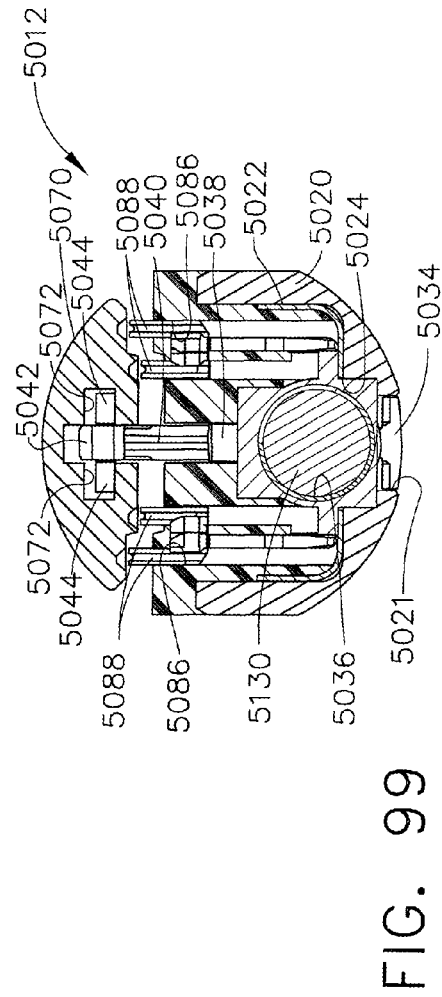
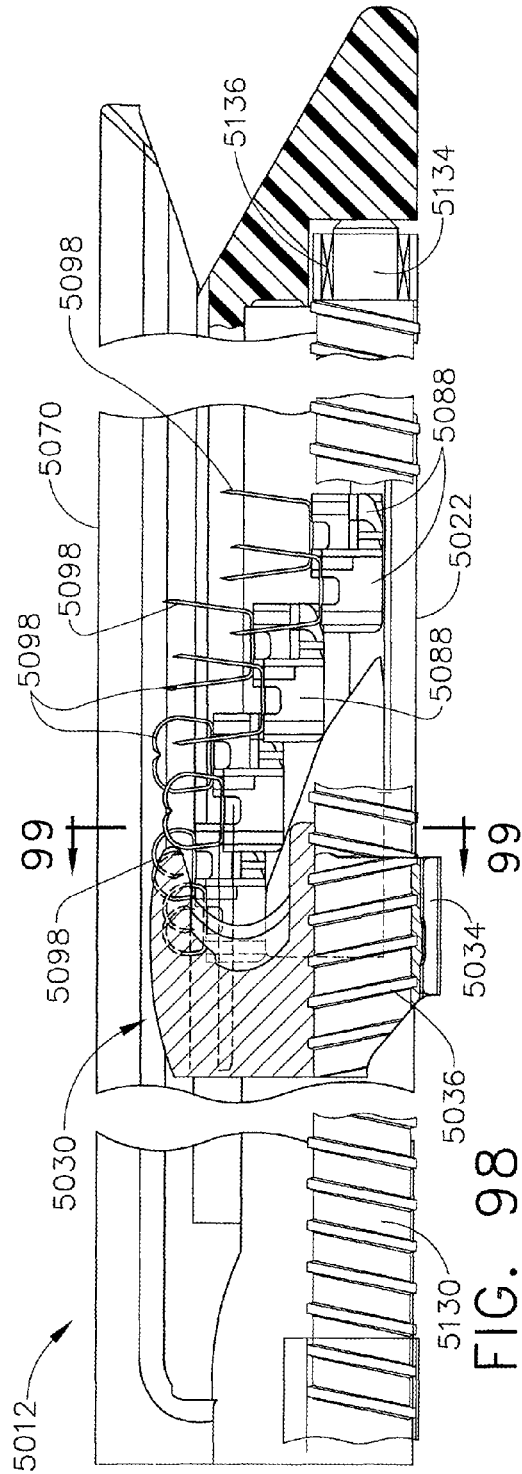


FIG. 97



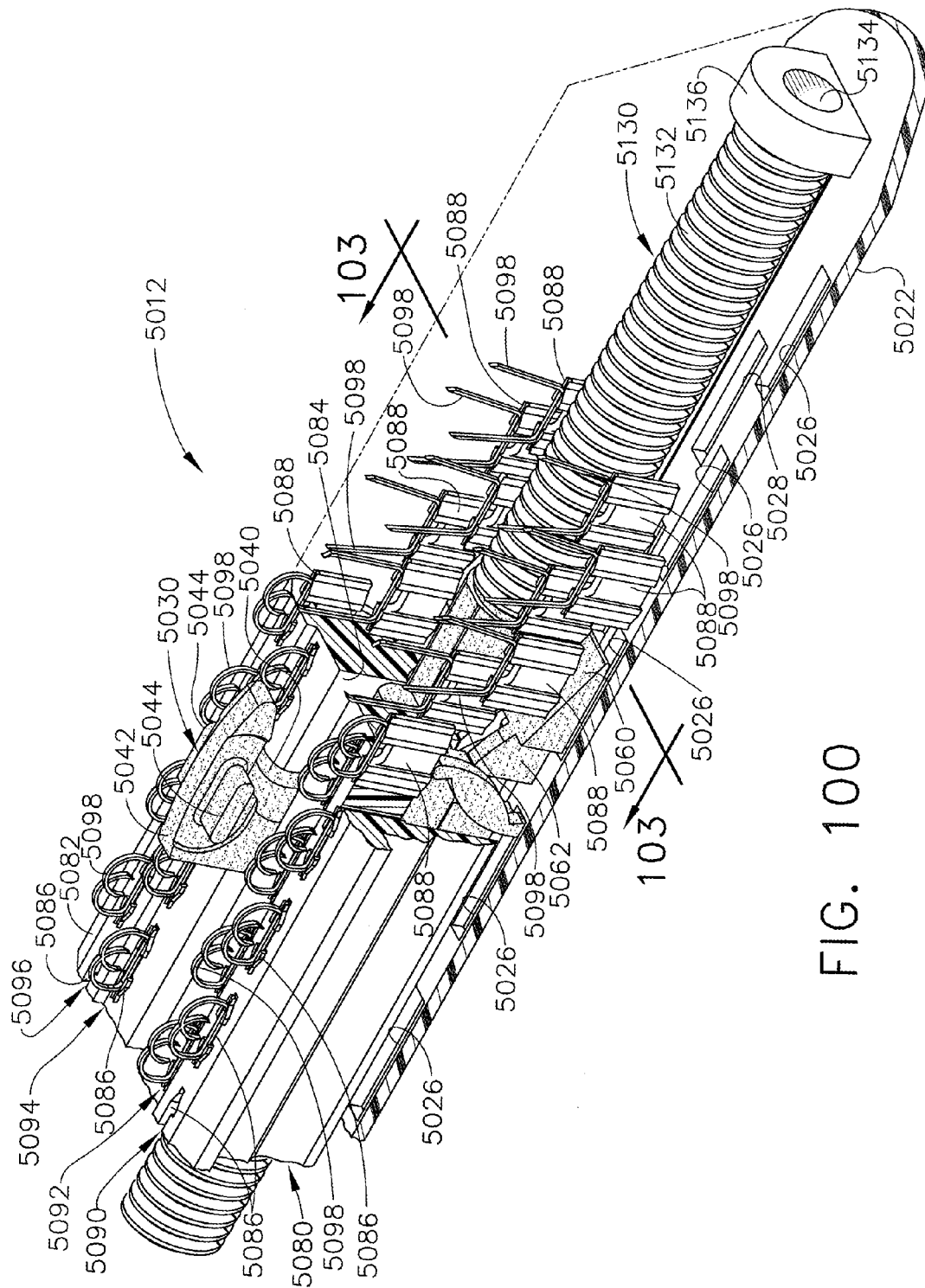


FIG. 100

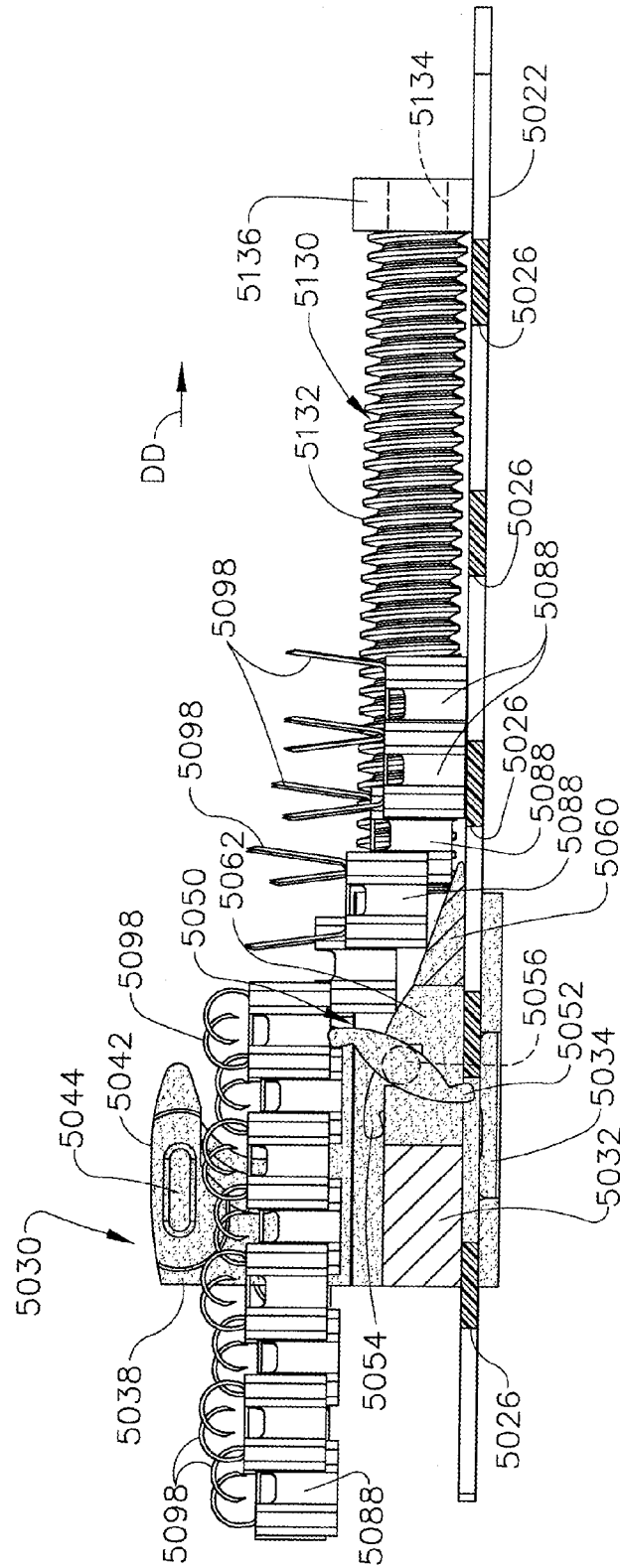


FIG. 101

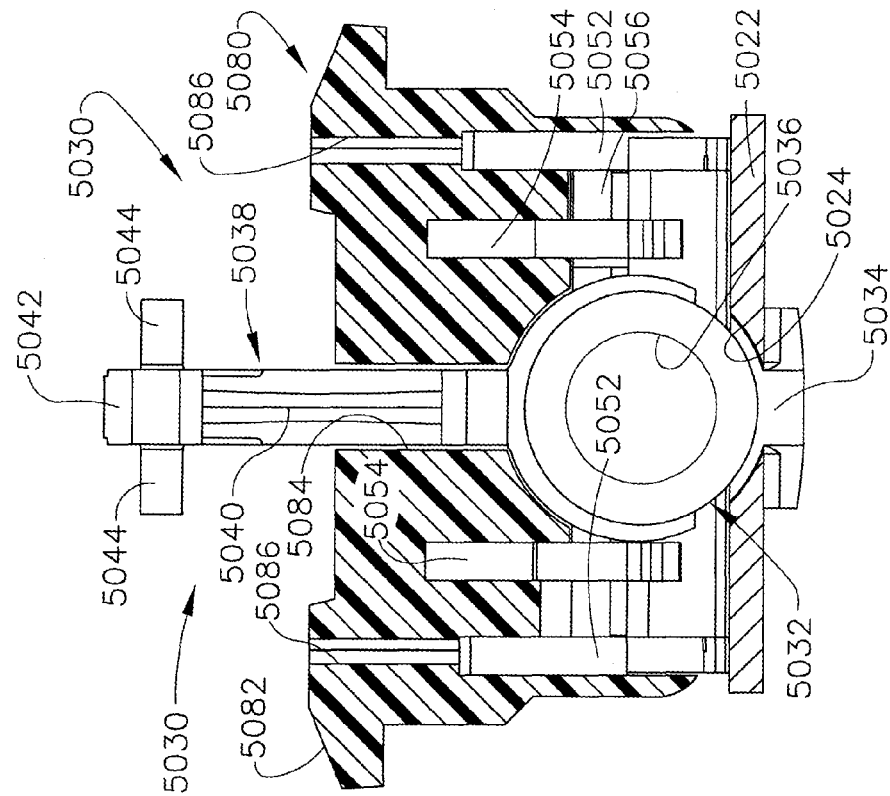


FIG. 103

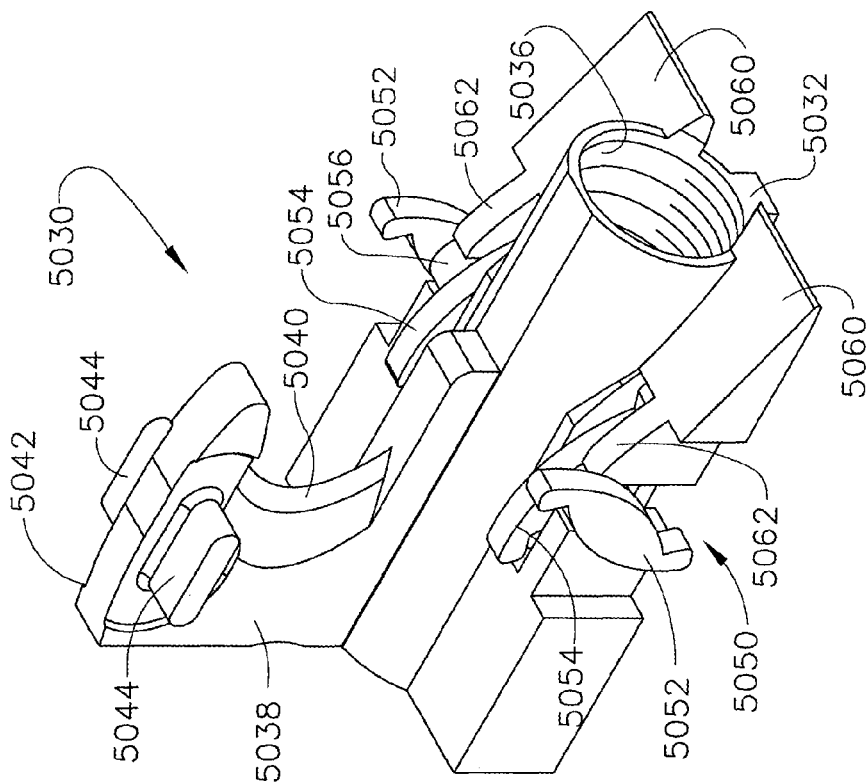


FIG. 102

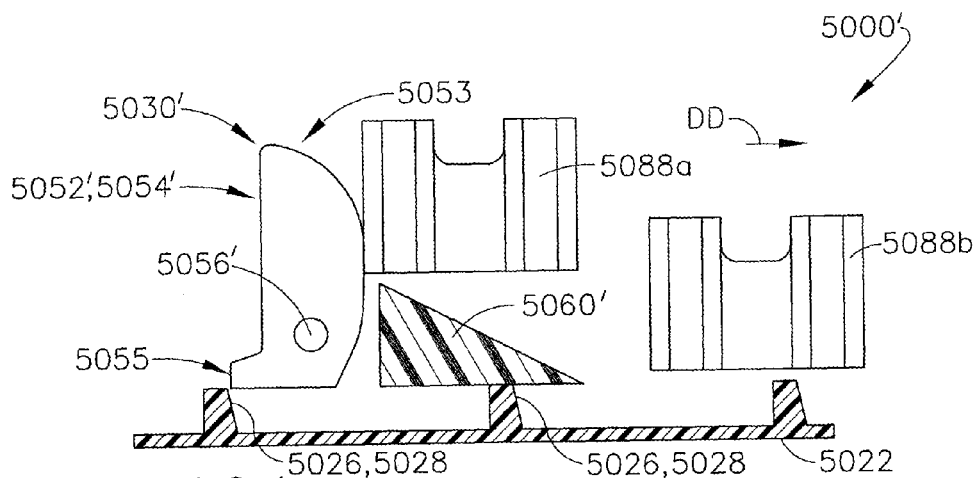


FIG. 104

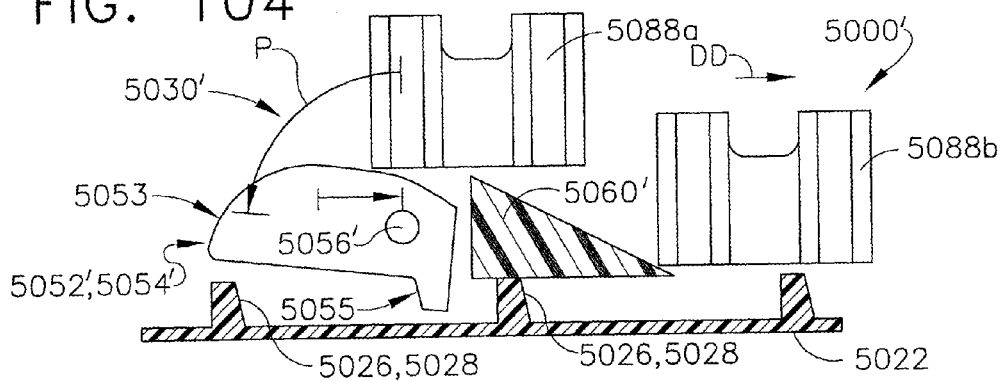


FIG. 105

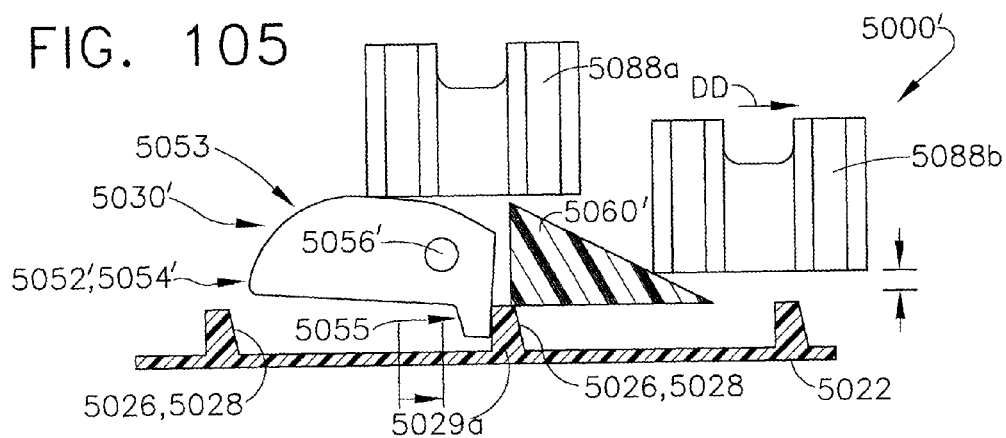


FIG. 106

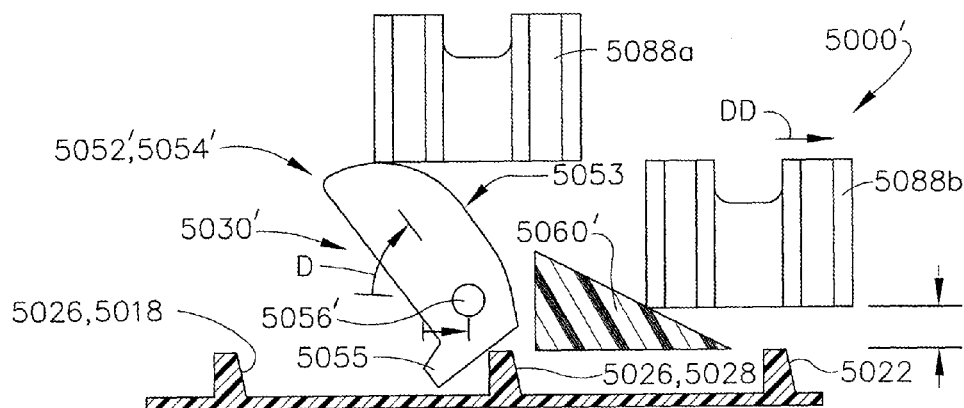


FIG. 107

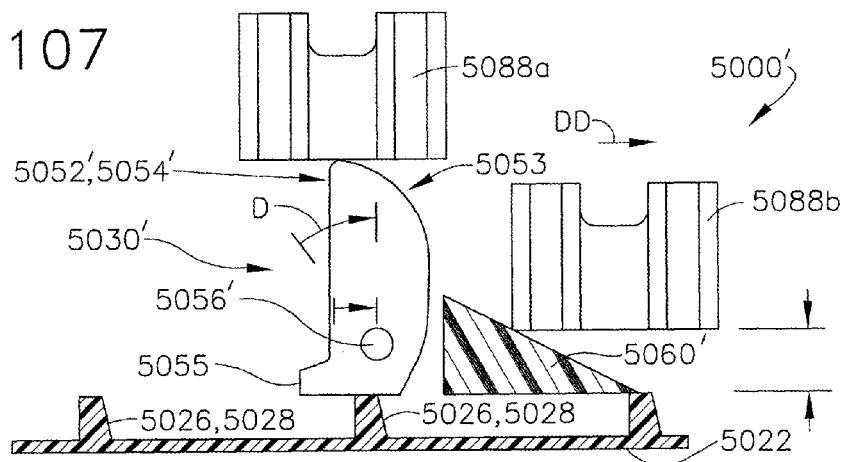


FIG. 108

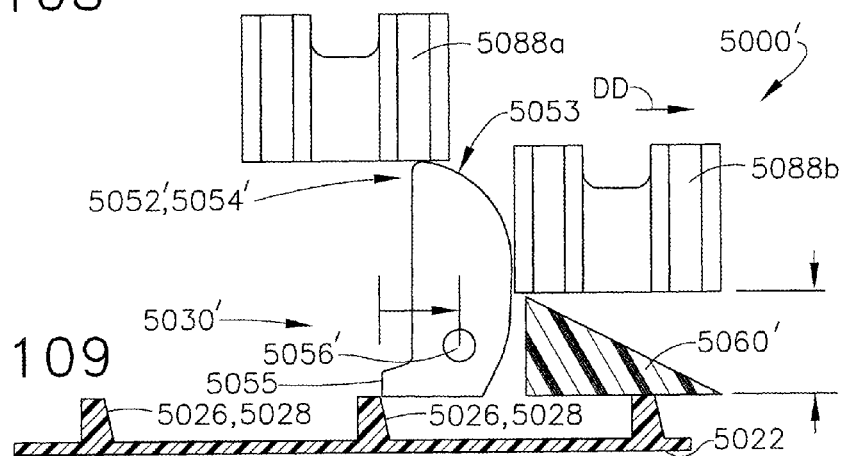


FIG. 109

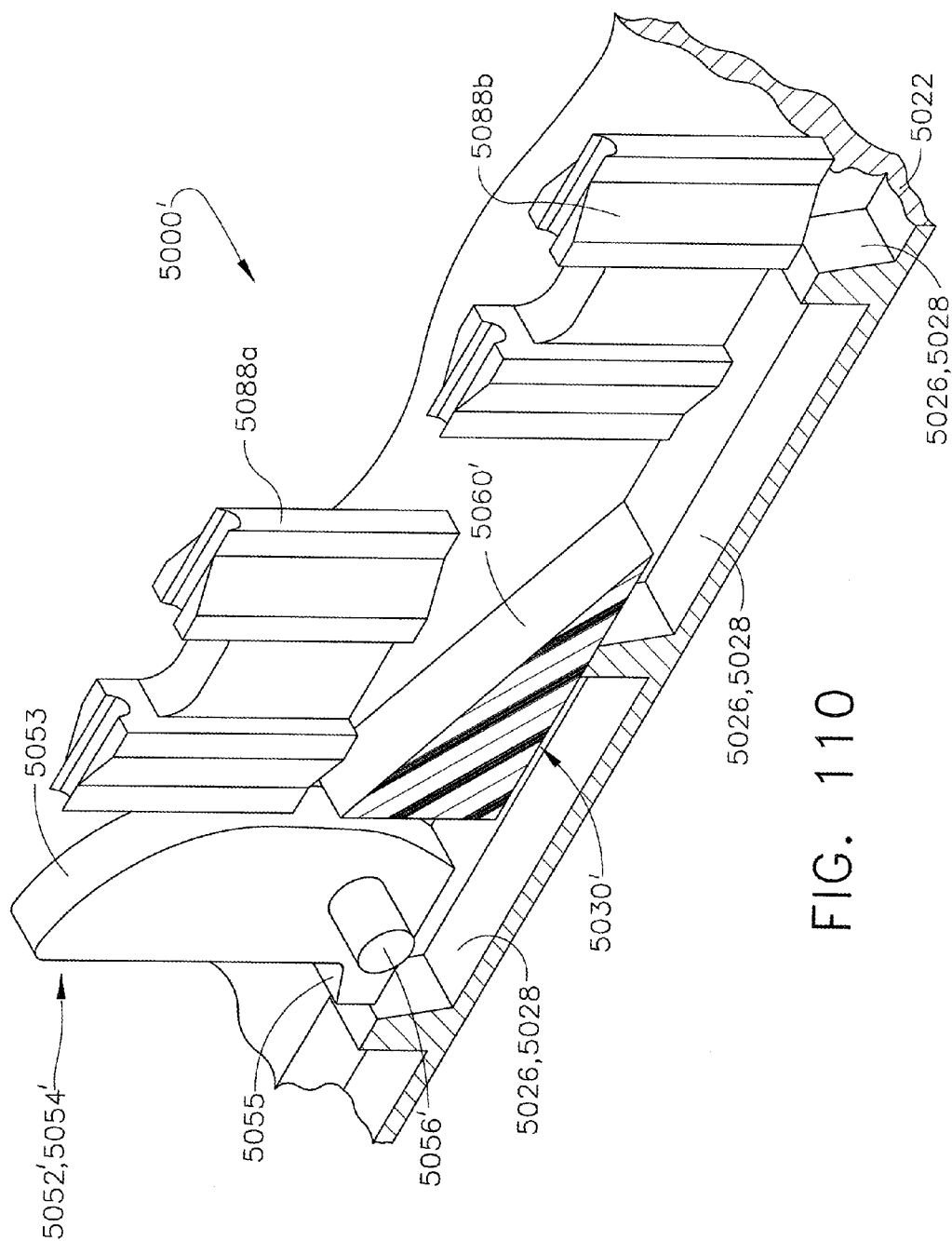


FIG. 110

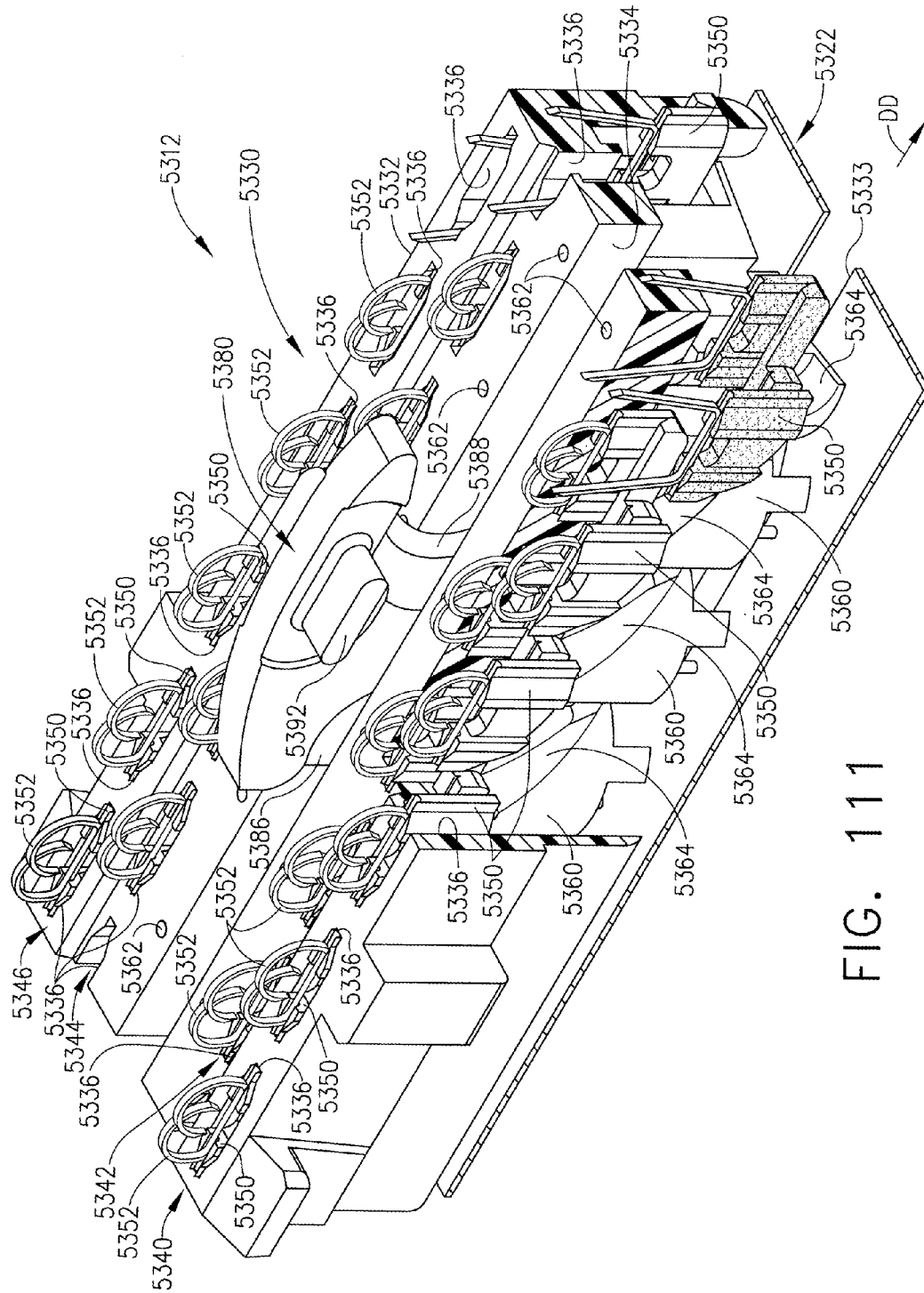


FIG. 111

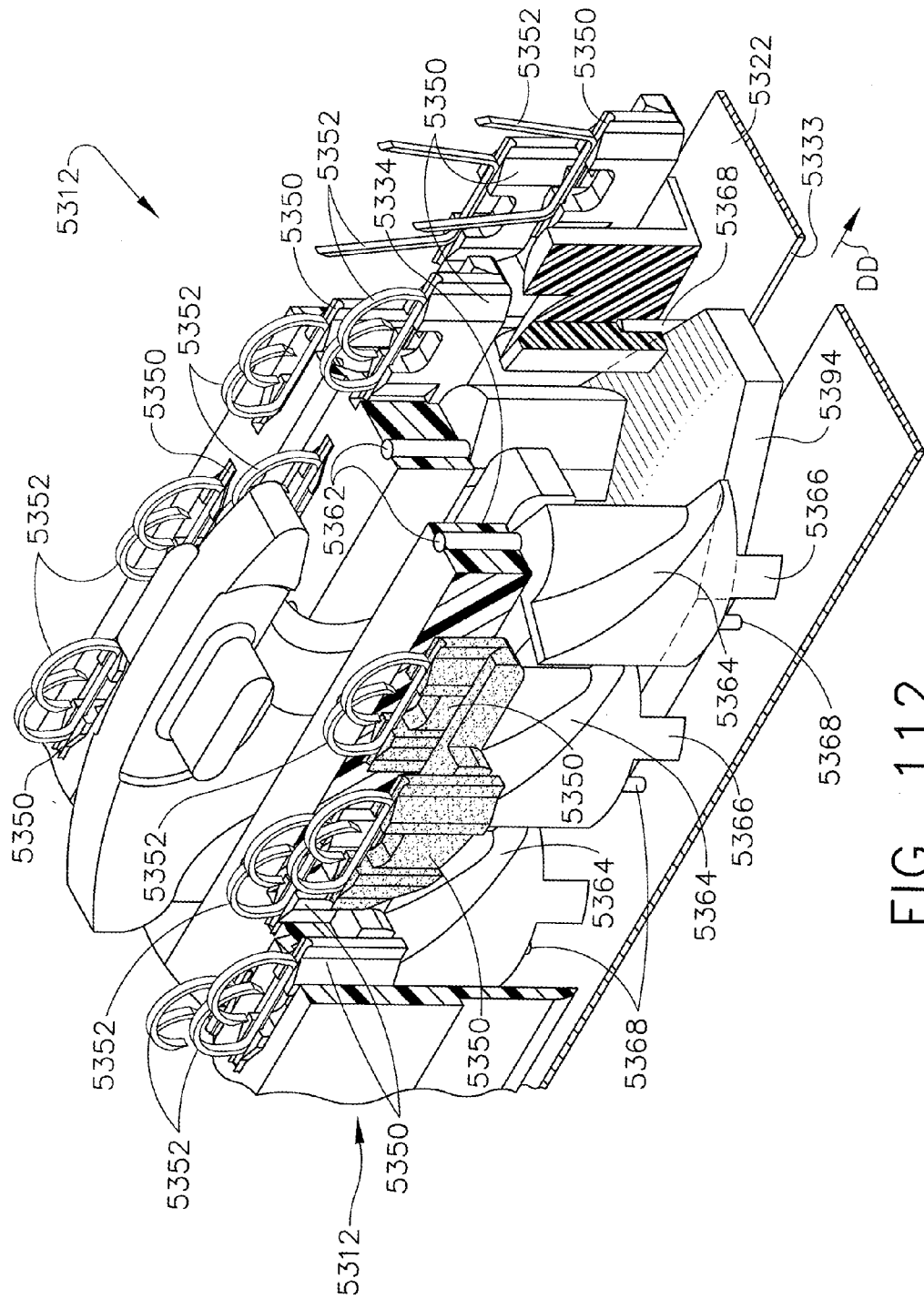


FIG. 112

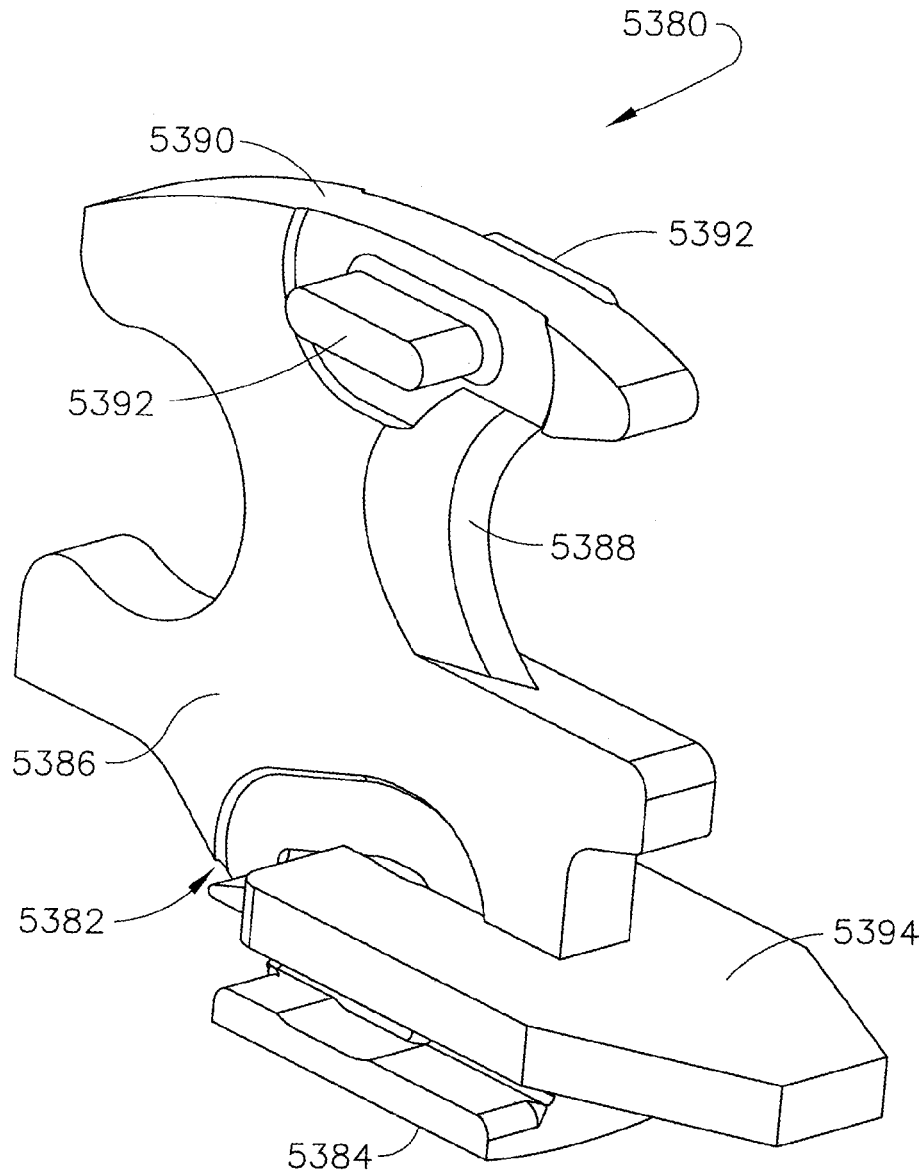


FIG. 113

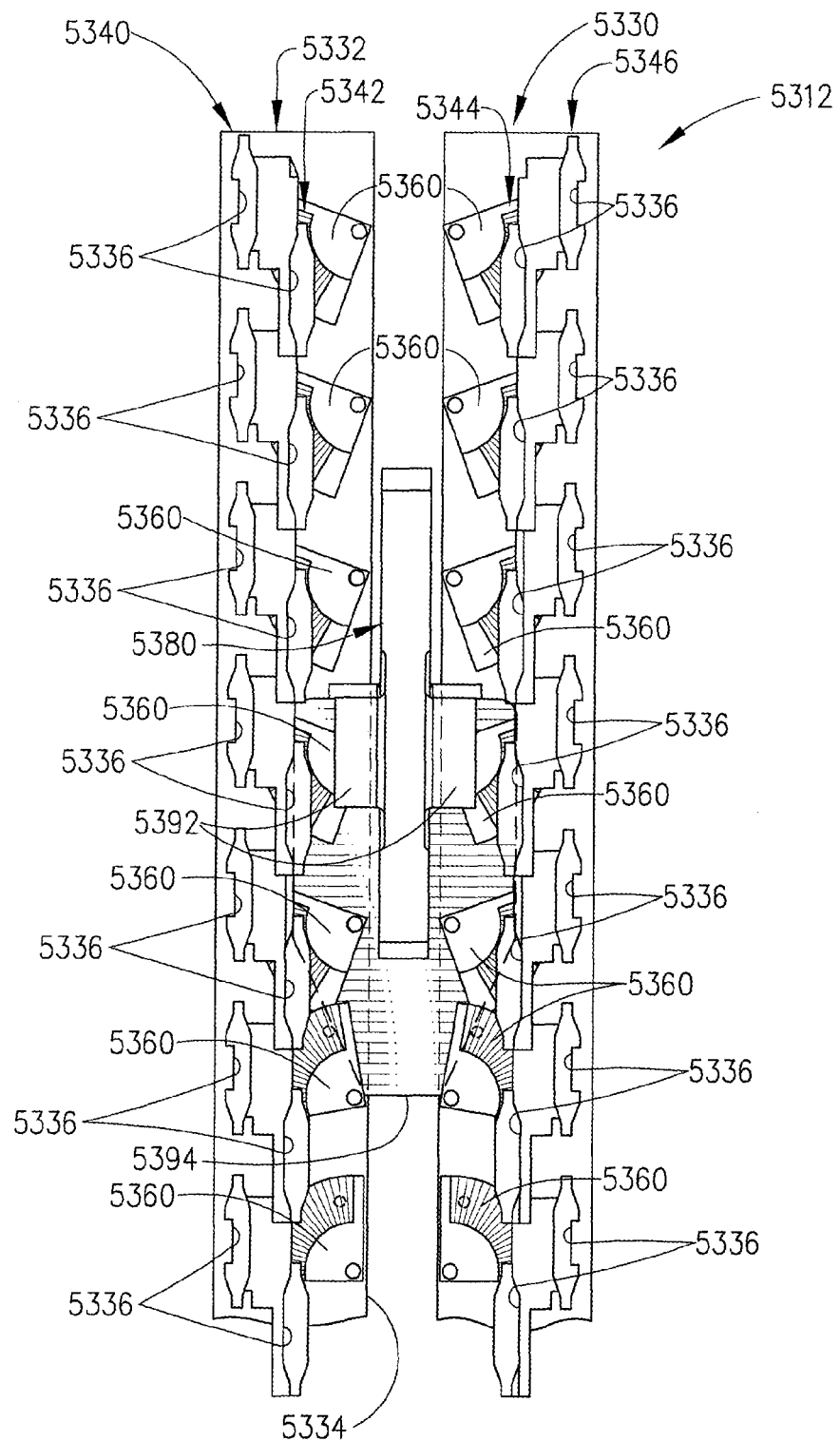


FIG. 114

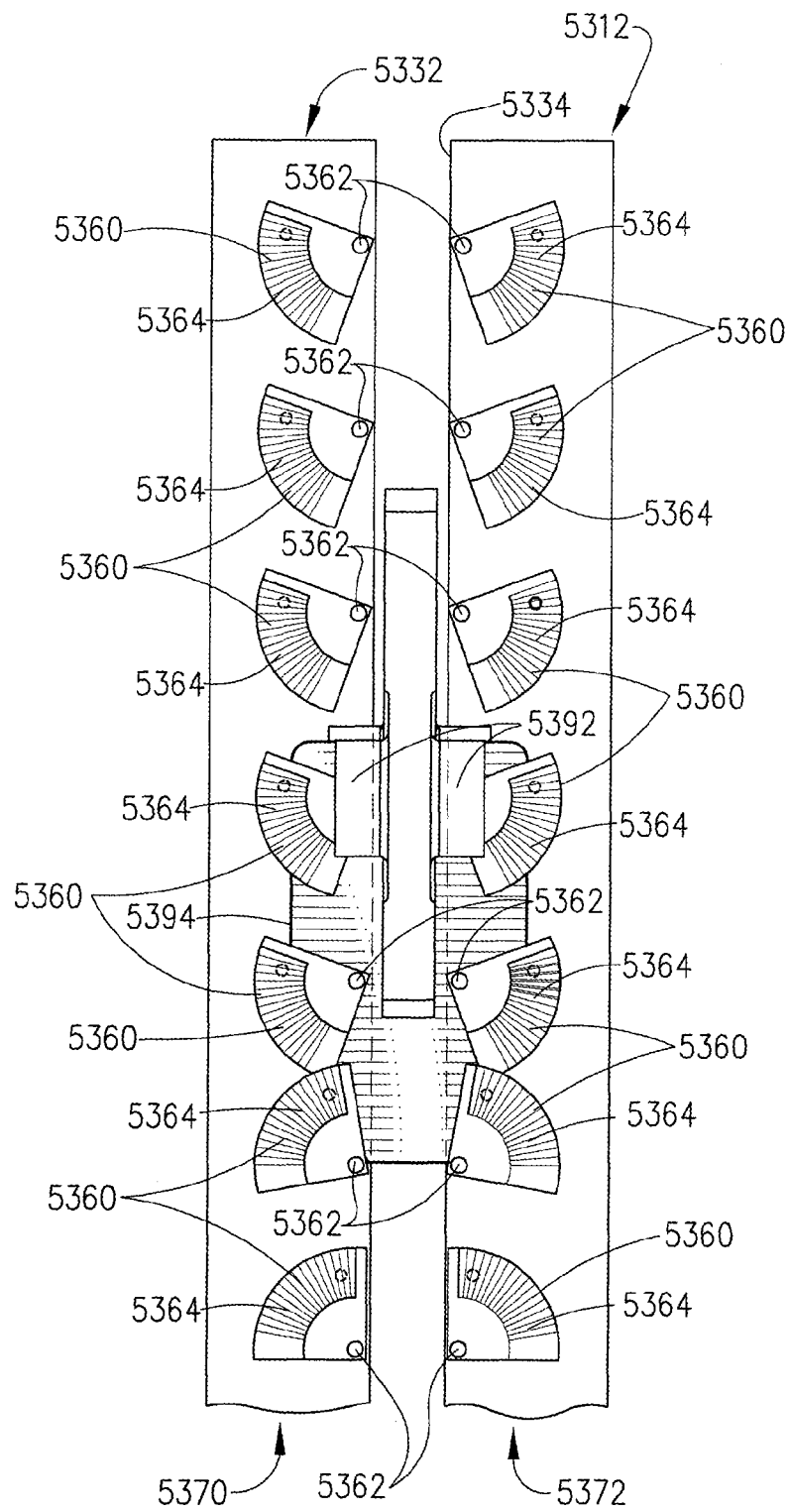


FIG. 115

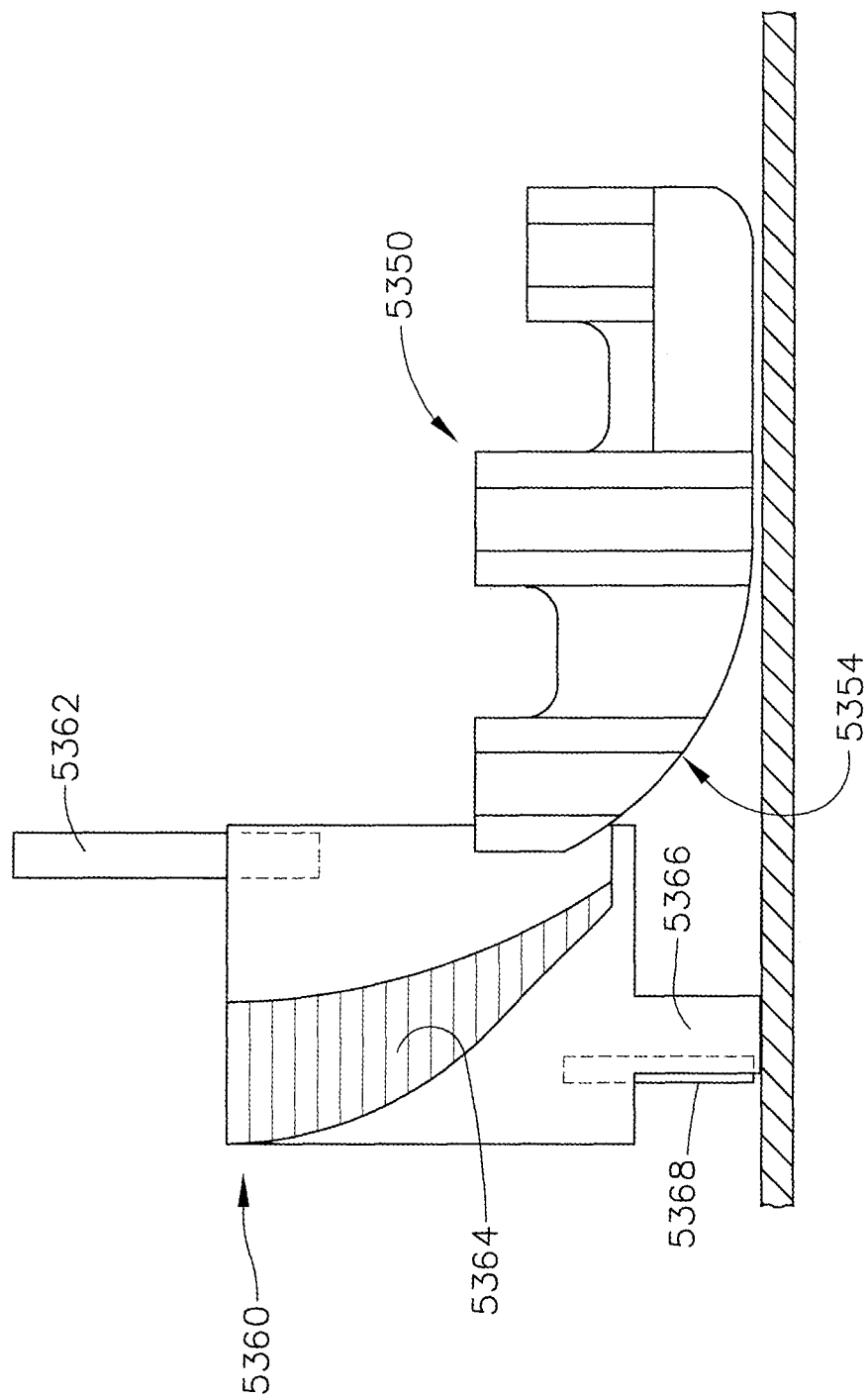


FIG. 116

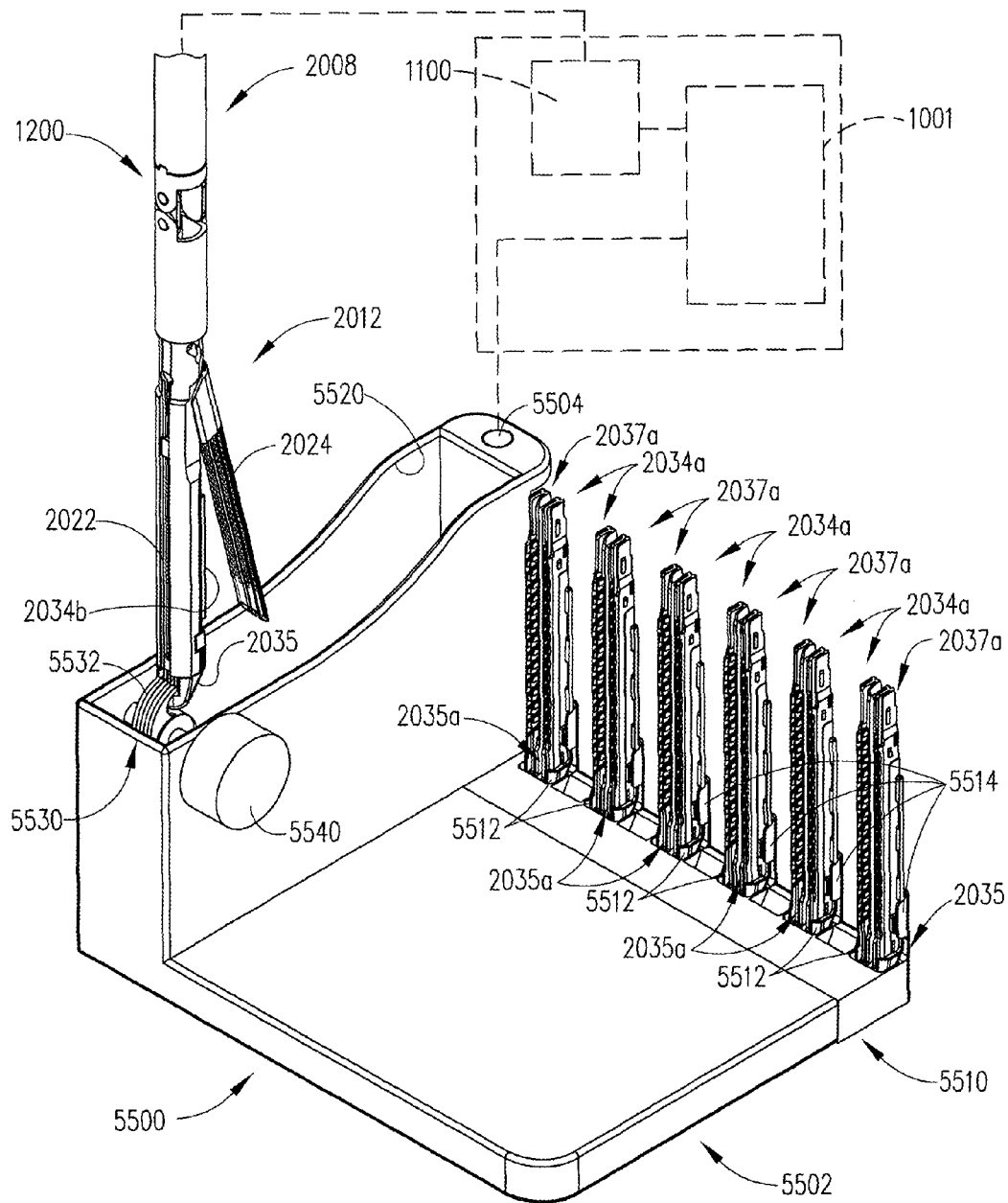


FIG. 117

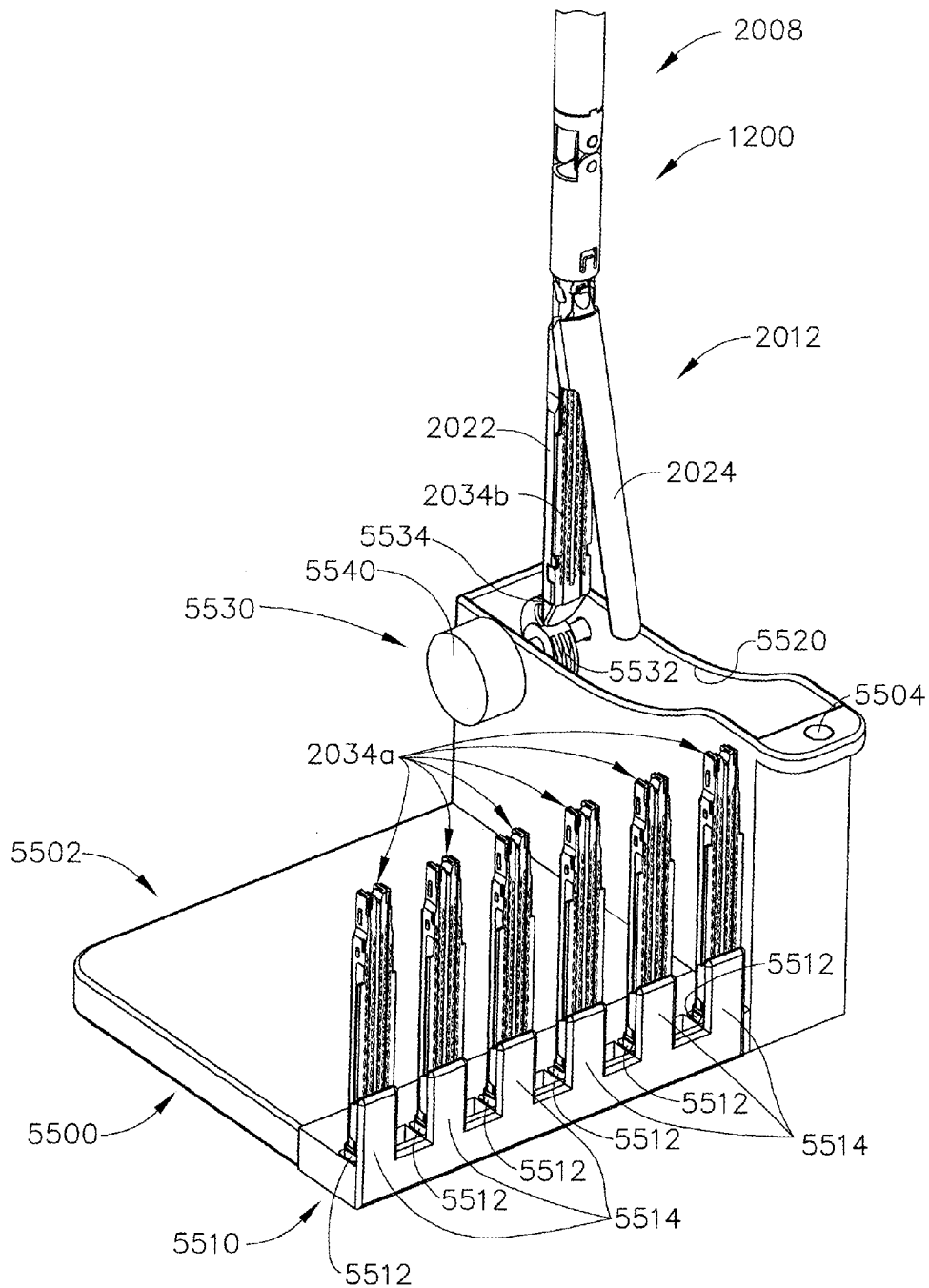
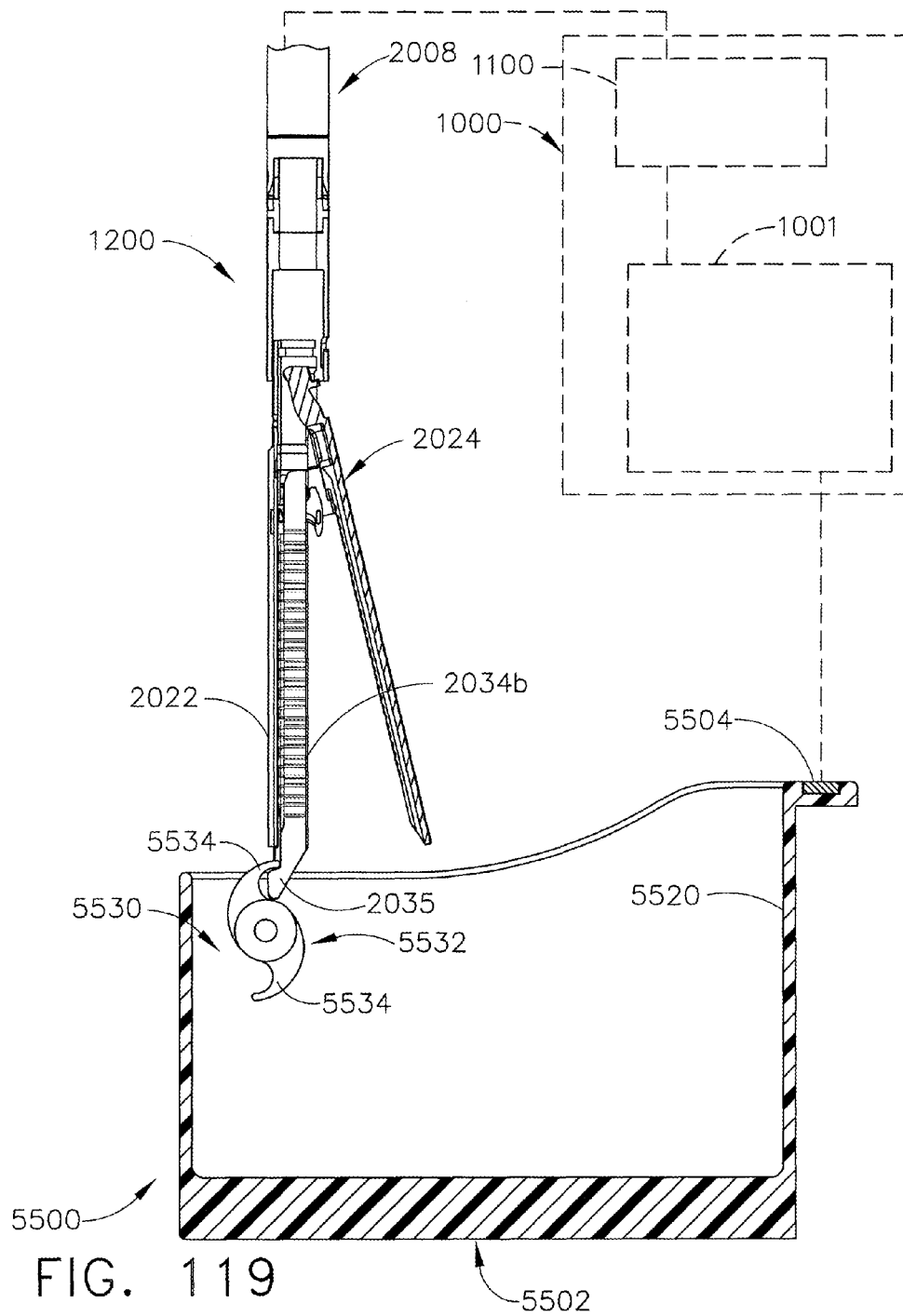
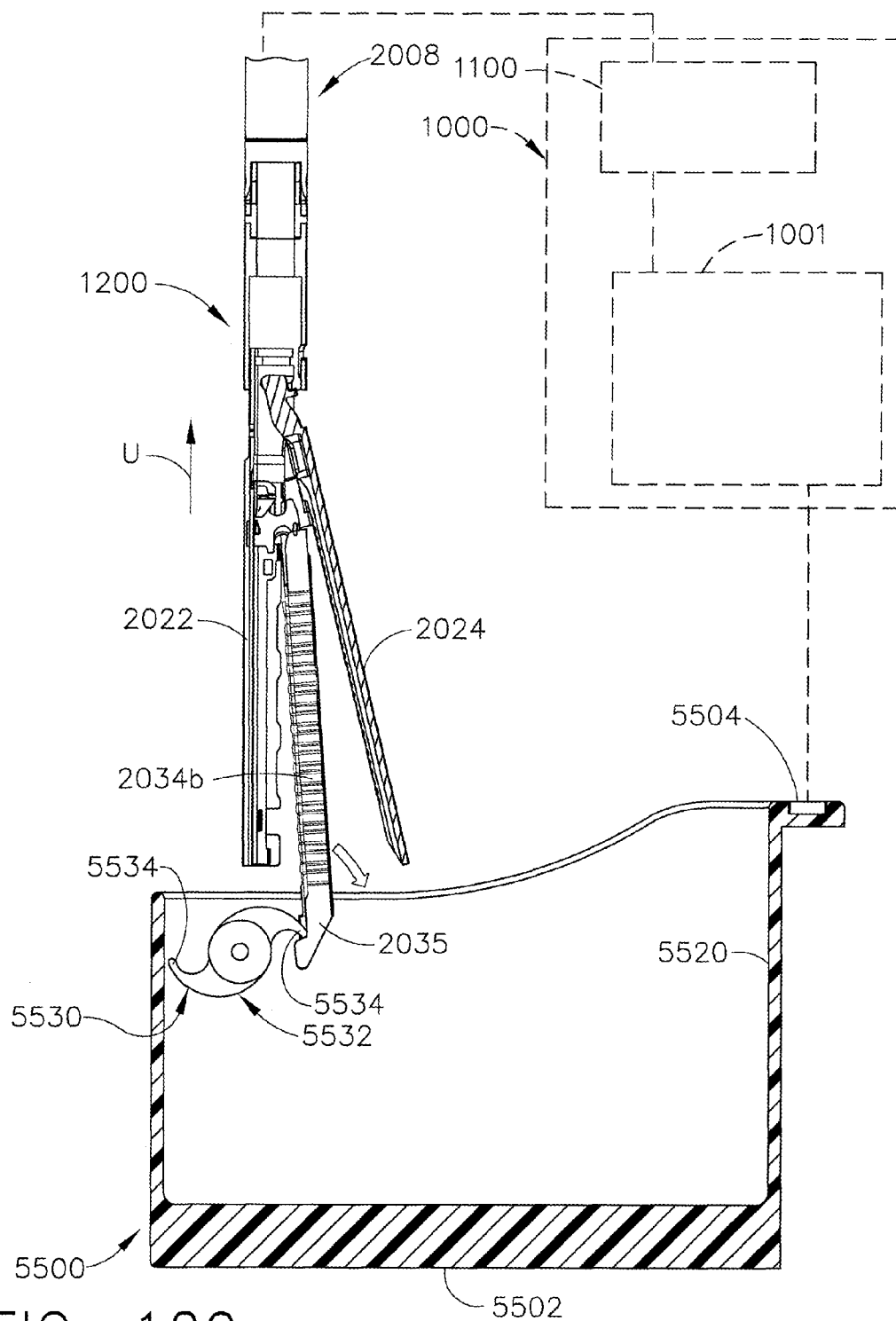
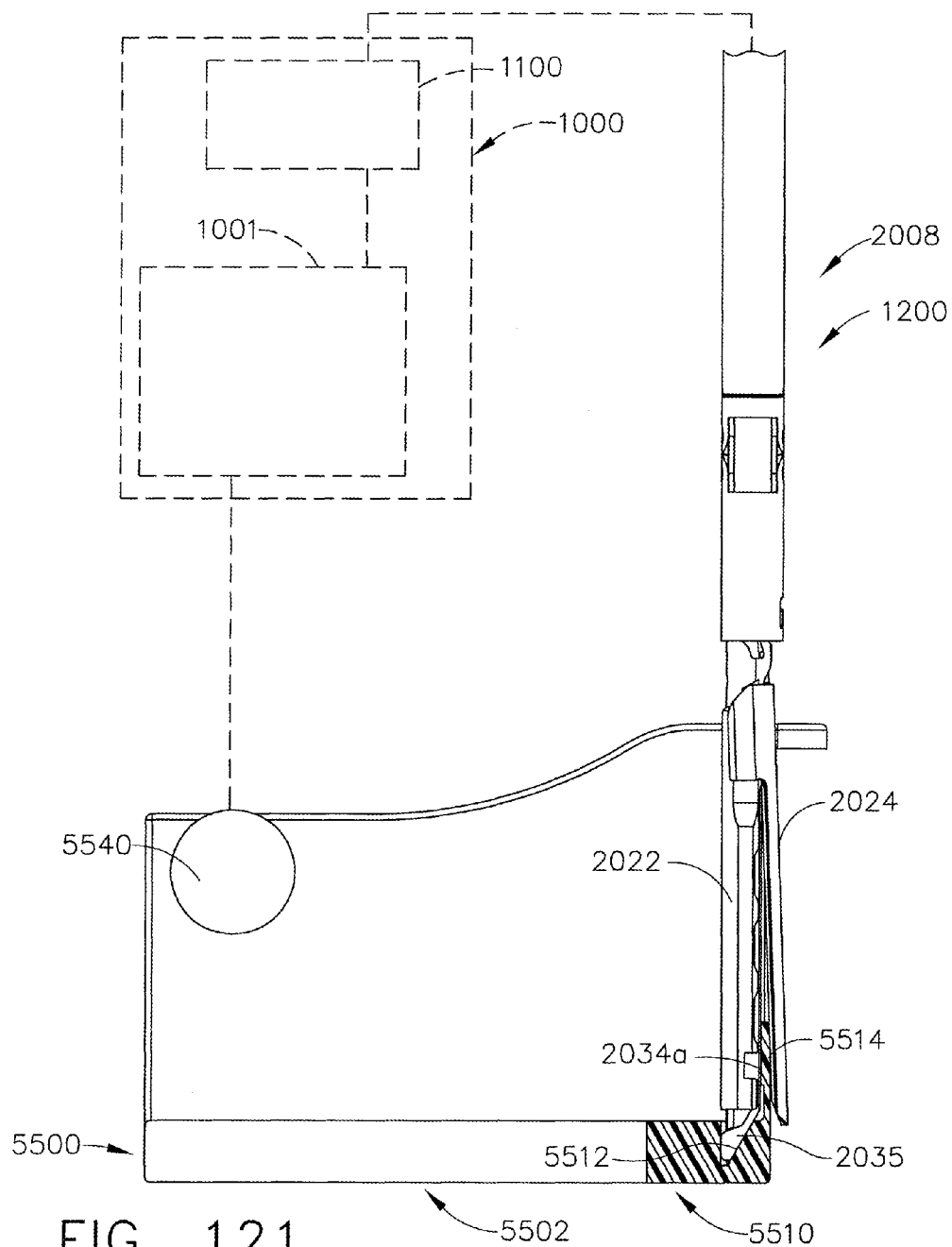
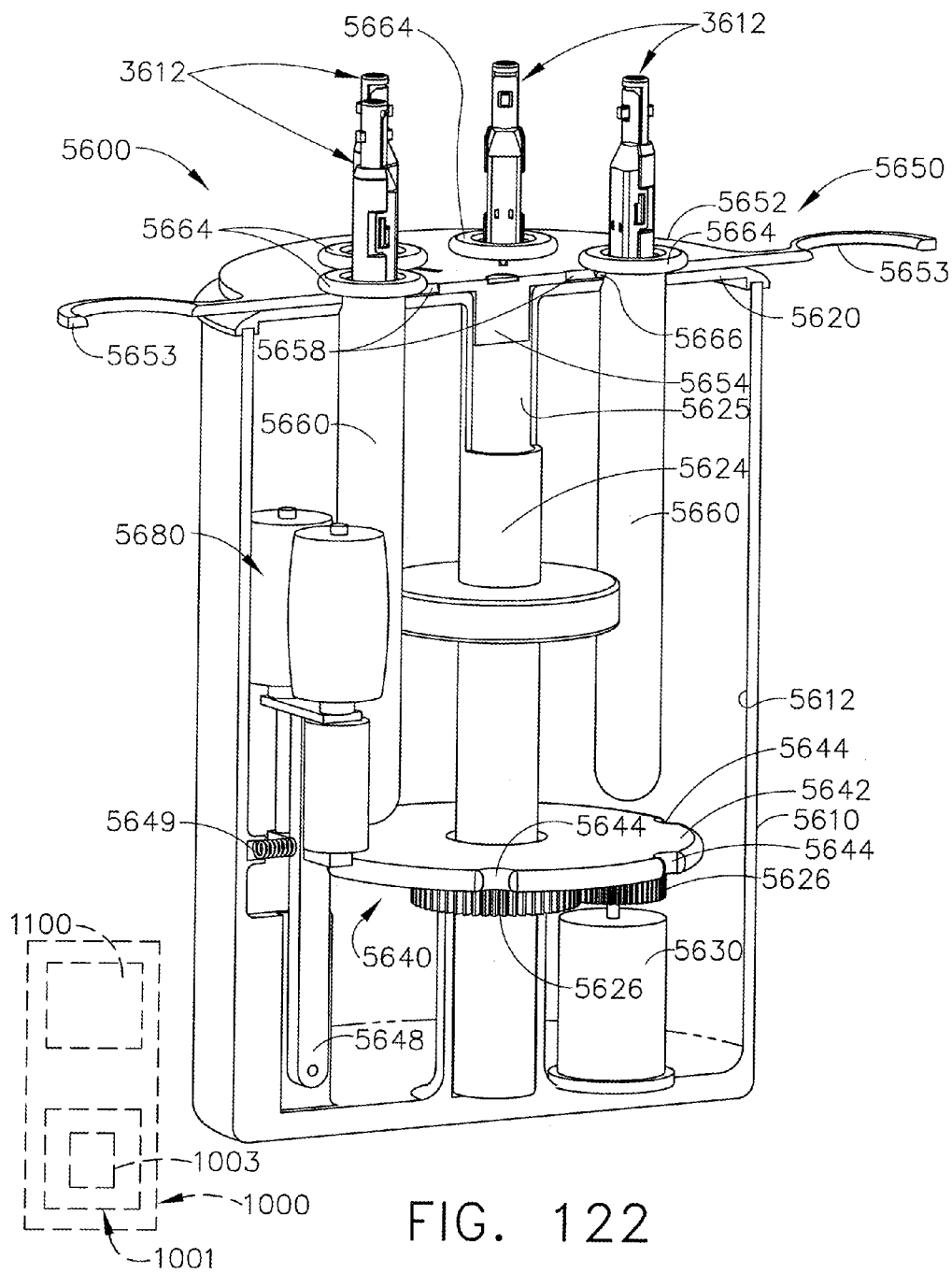


FIG. 118









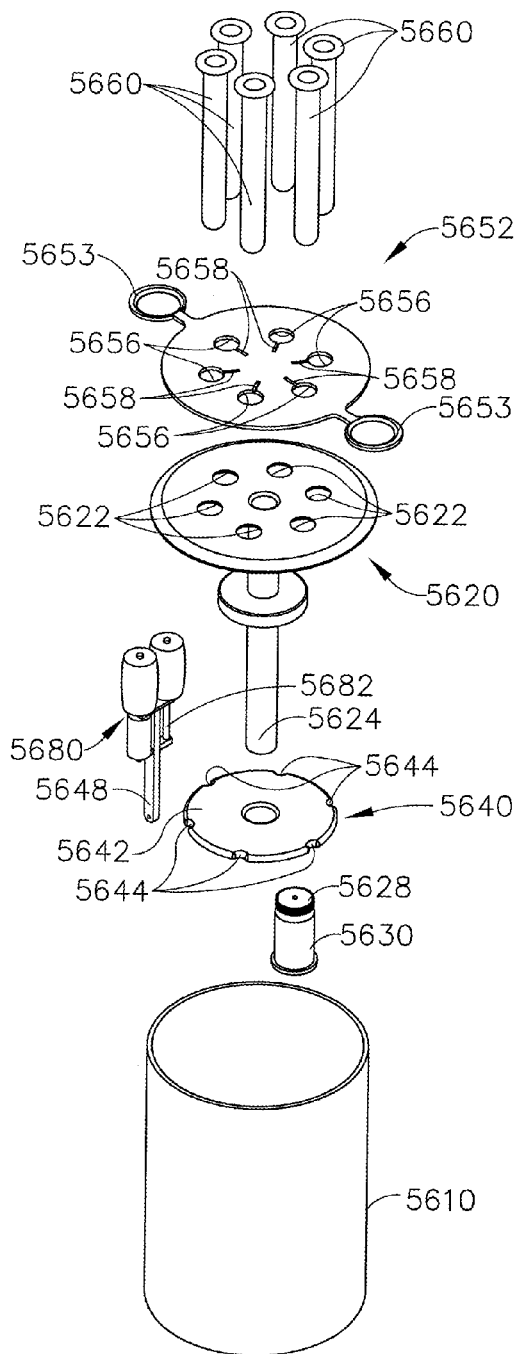


FIG. 123

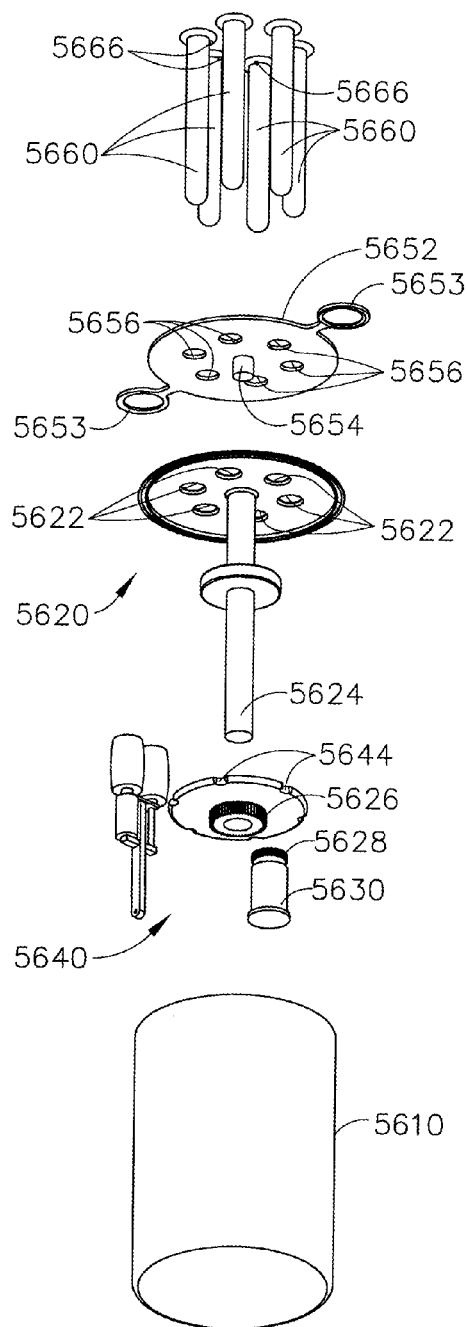


FIG. 124

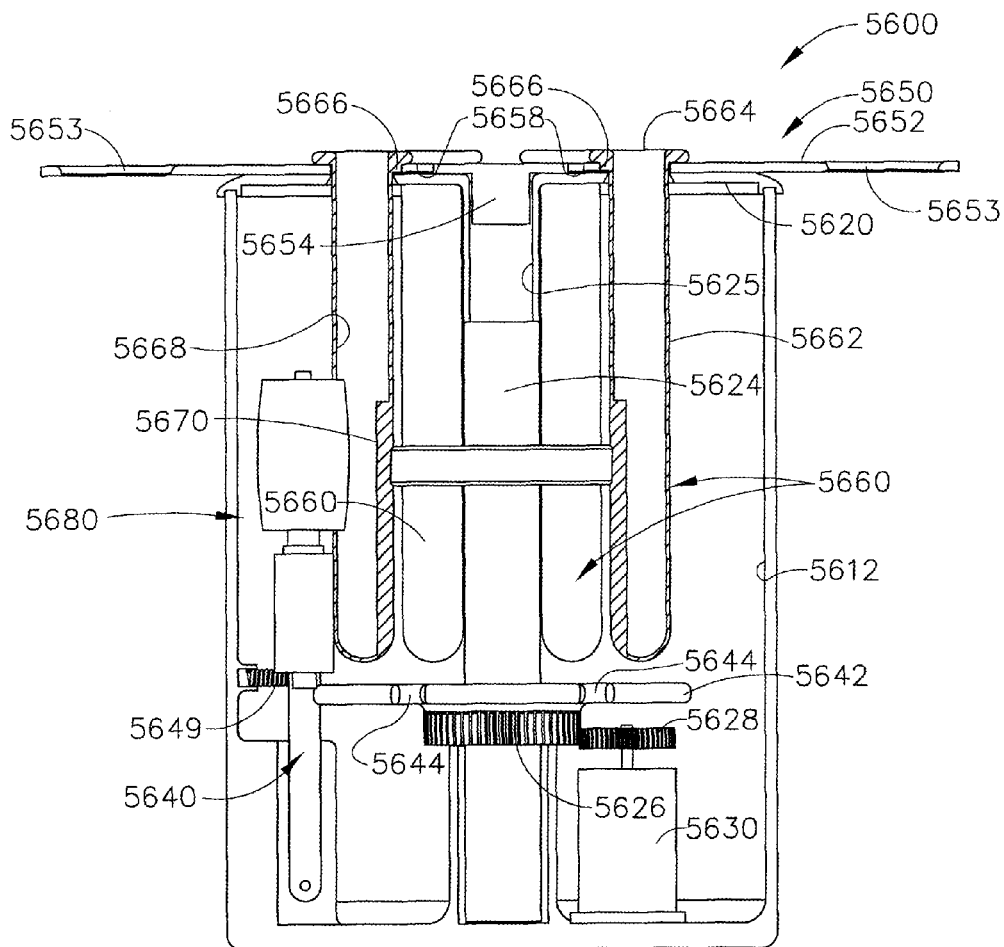


FIG. 125

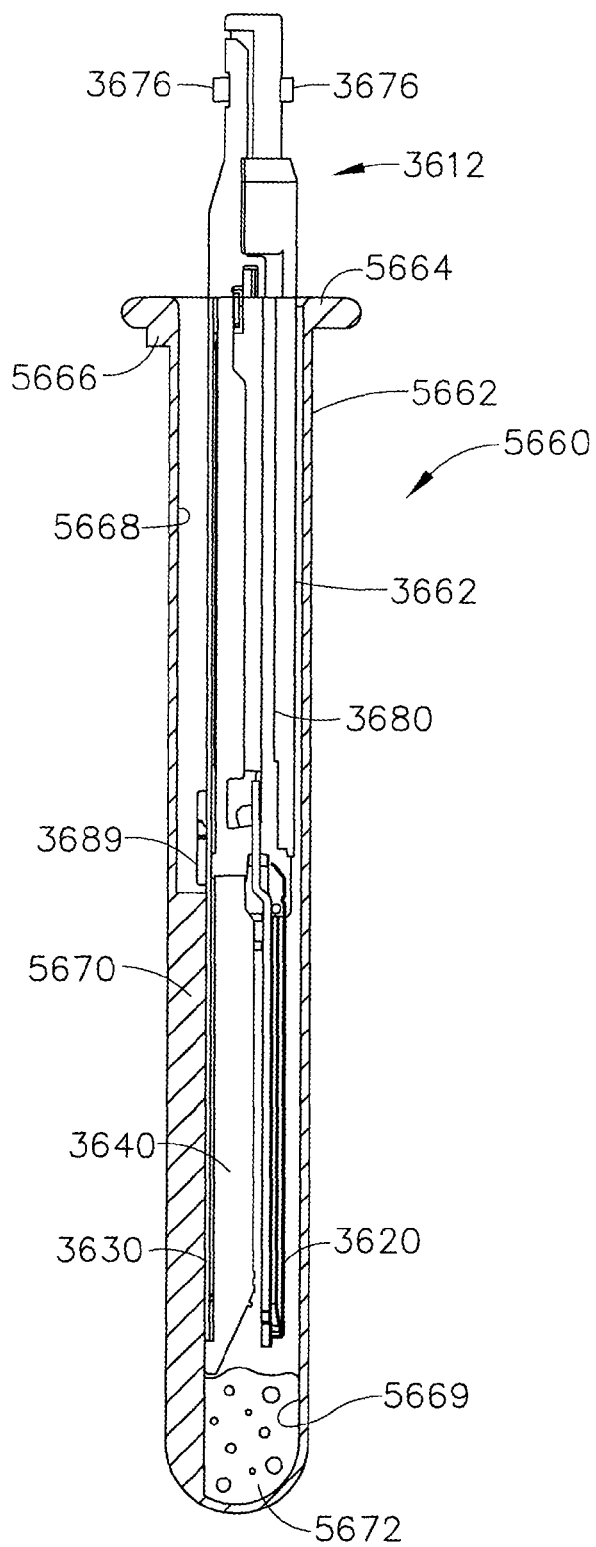


FIG. 126

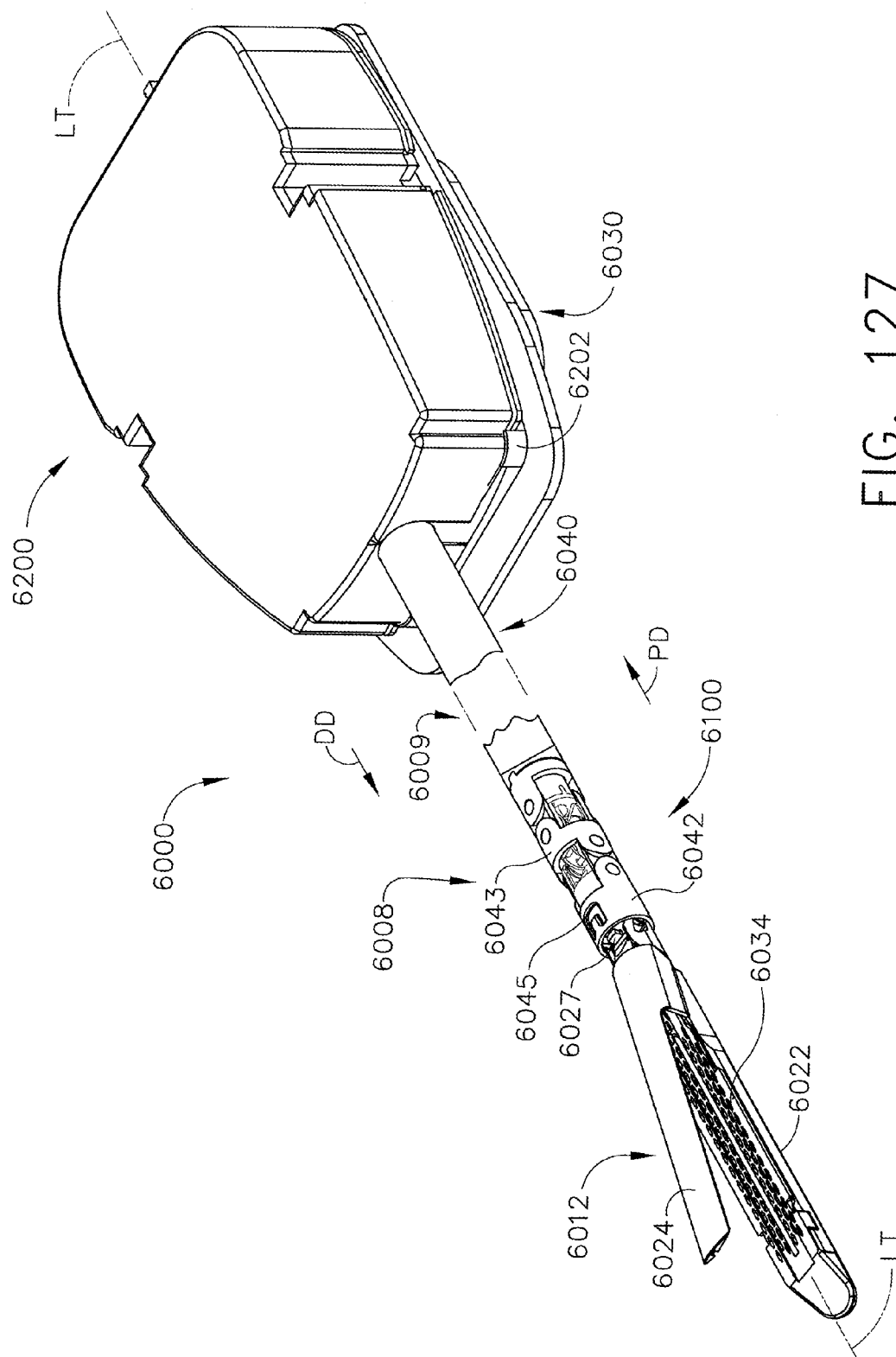


FIG. 127

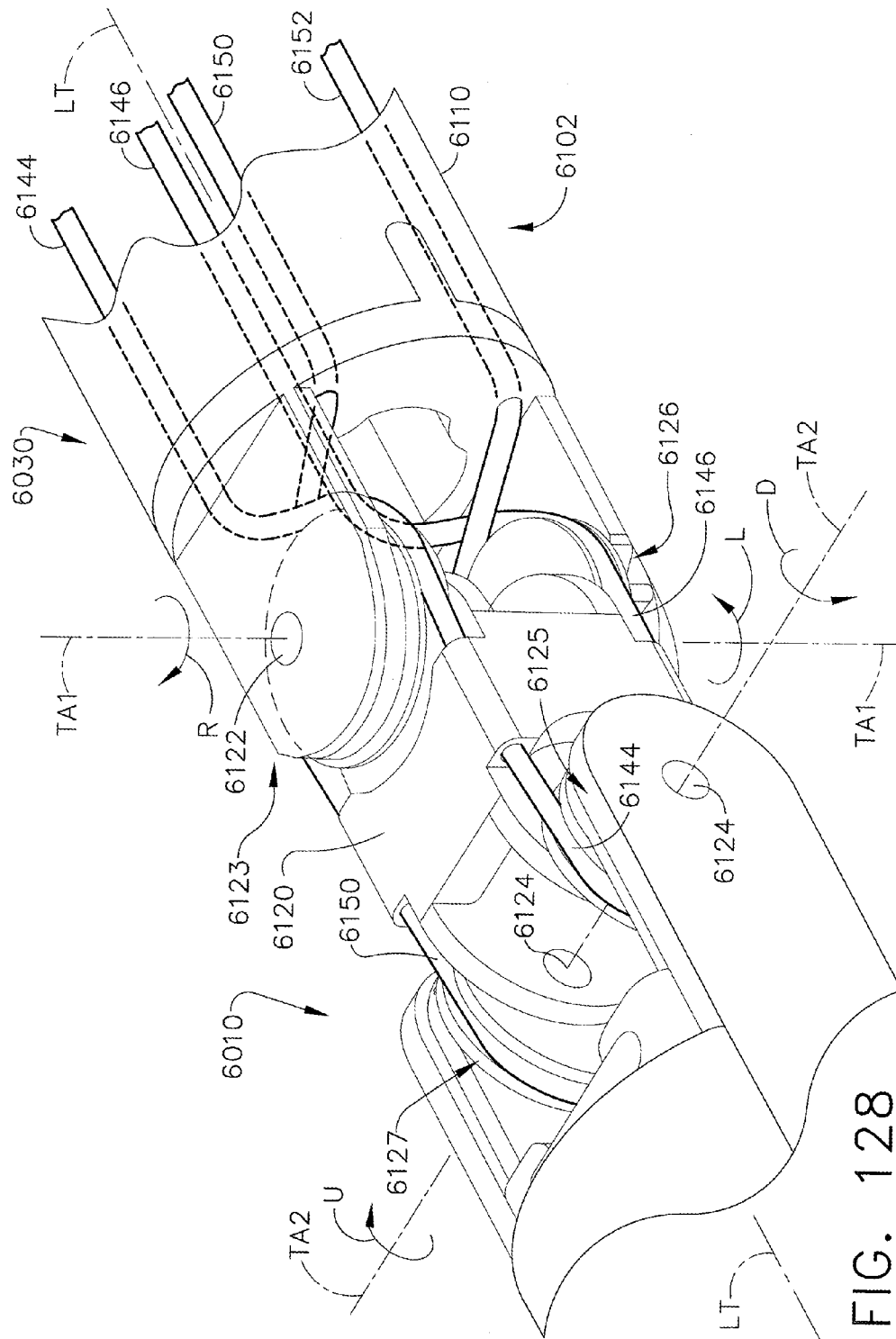


FIG. 128

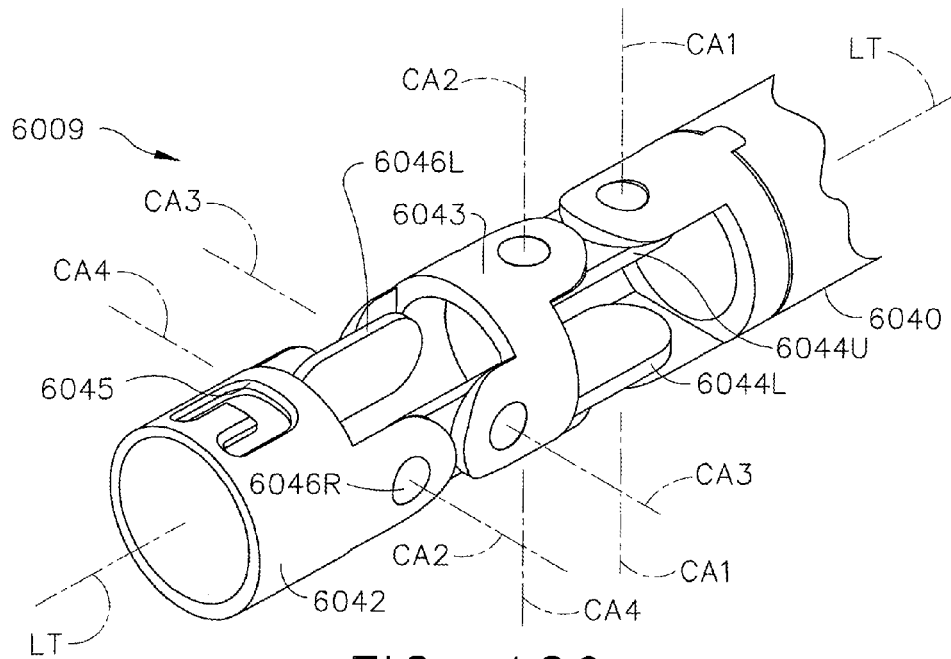


FIG. 129

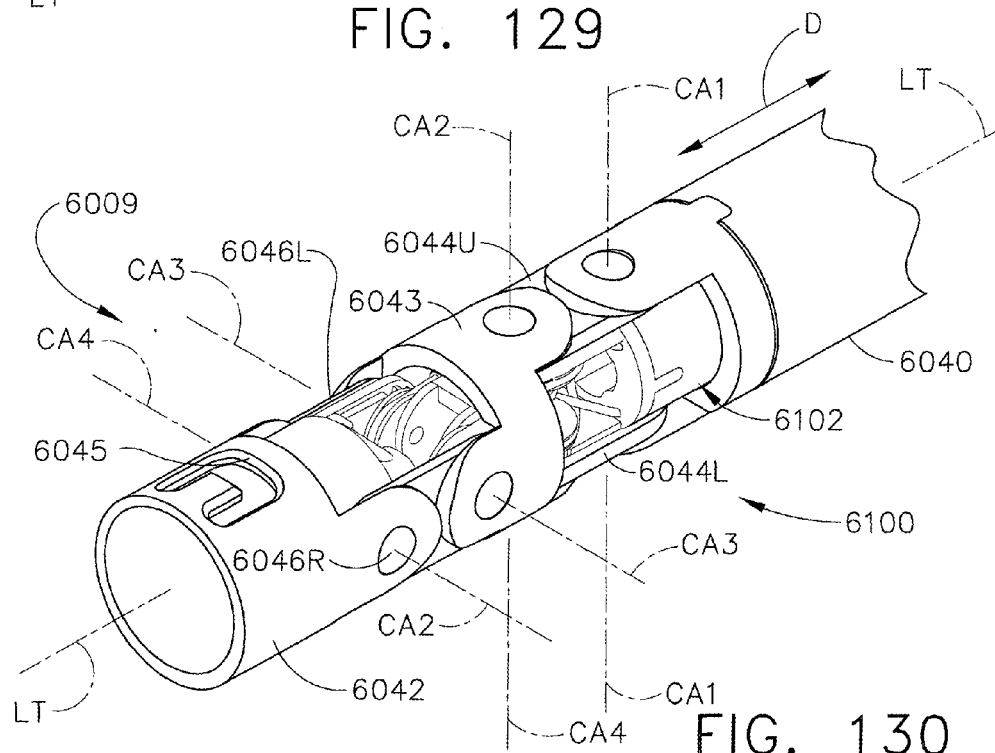


FIG. 130

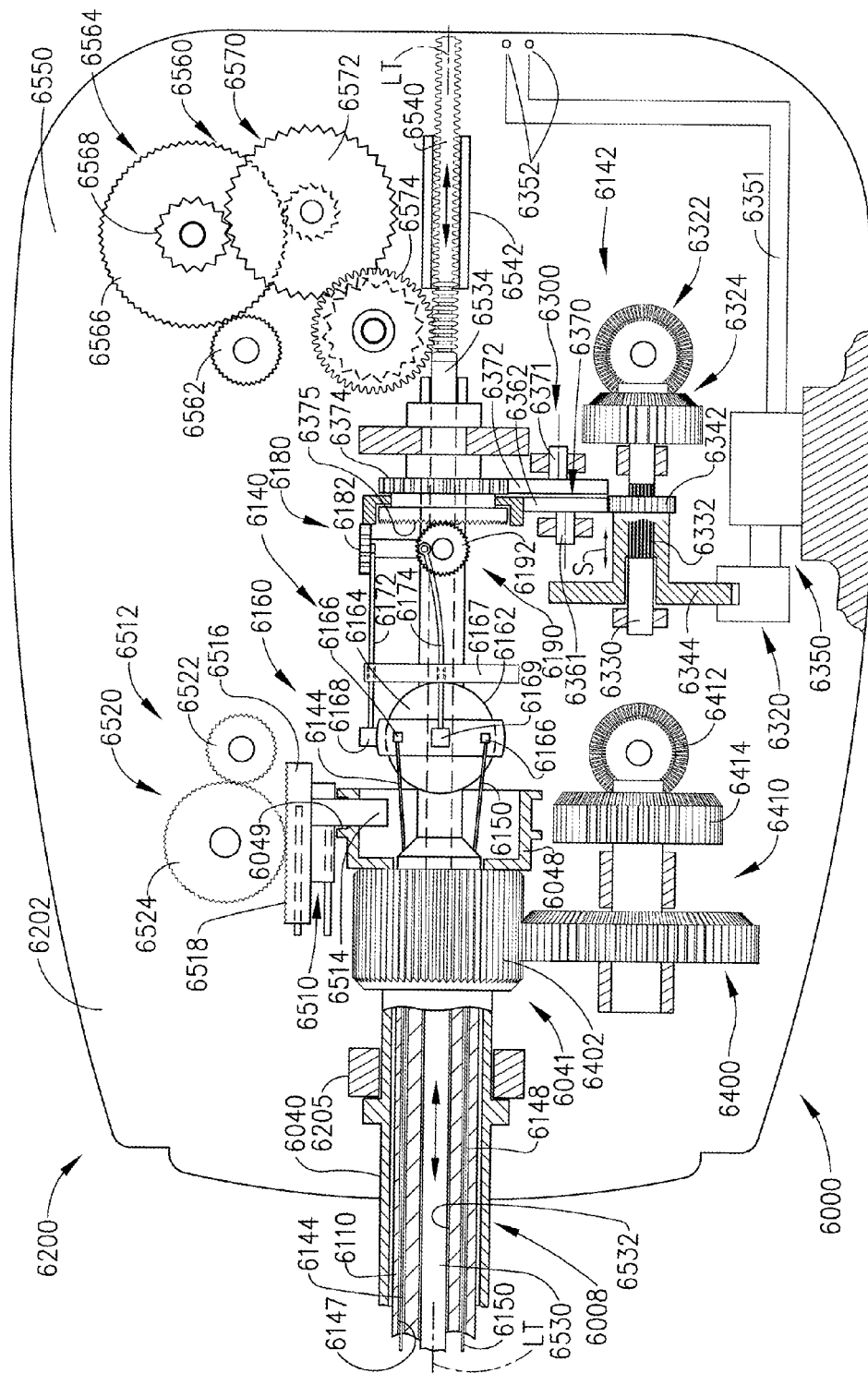


FIG. 131

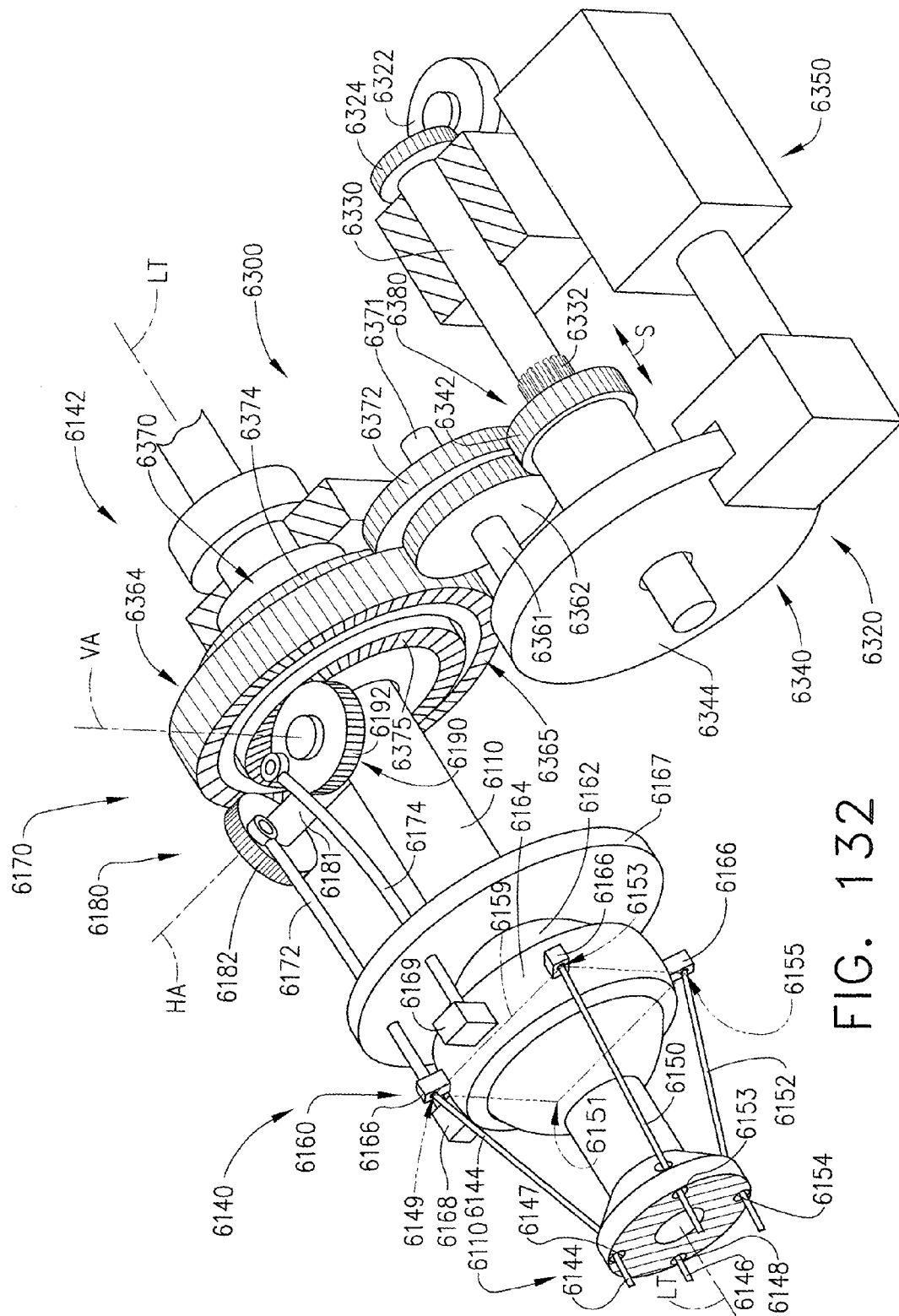


FIG. 132

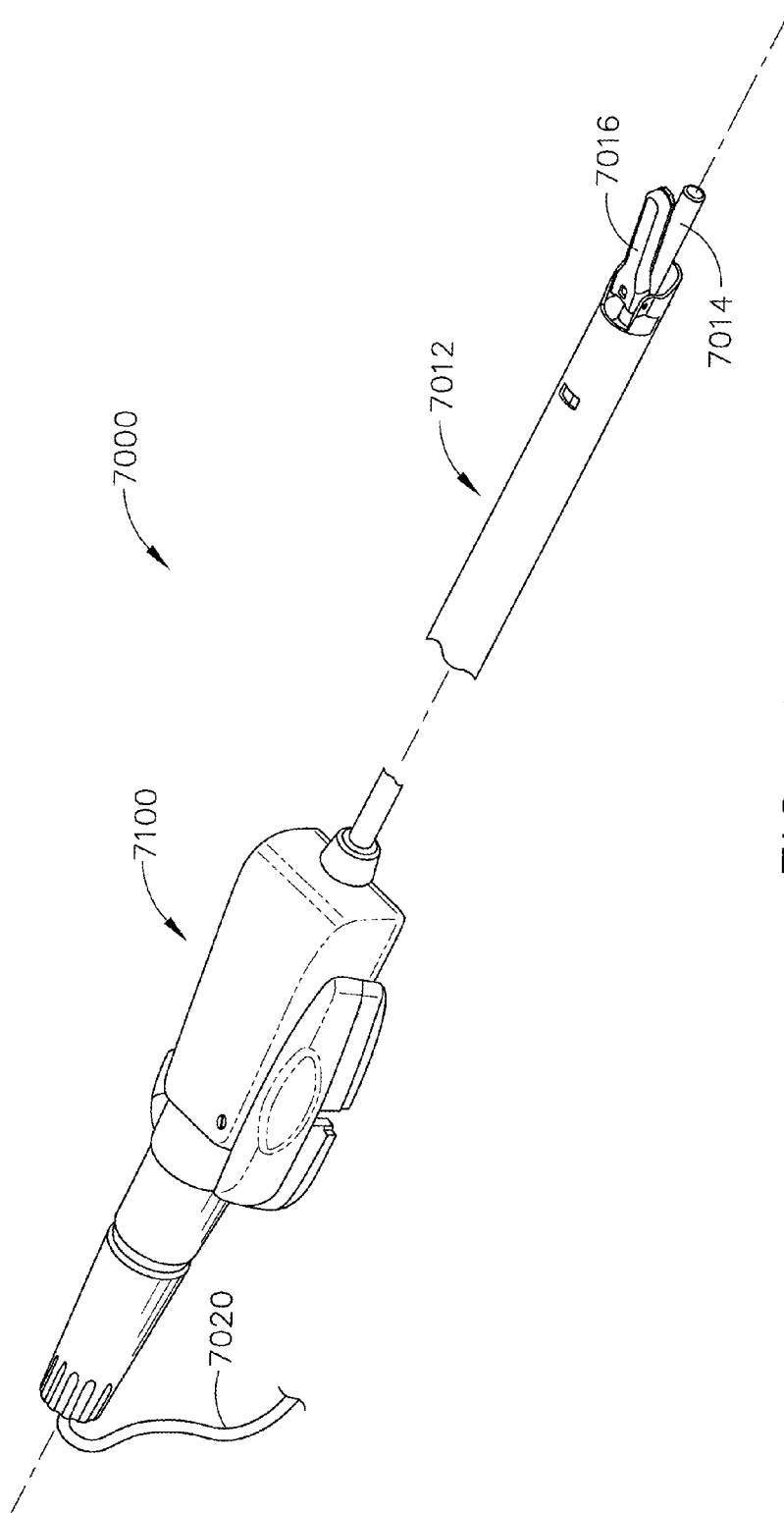


FIG. 133

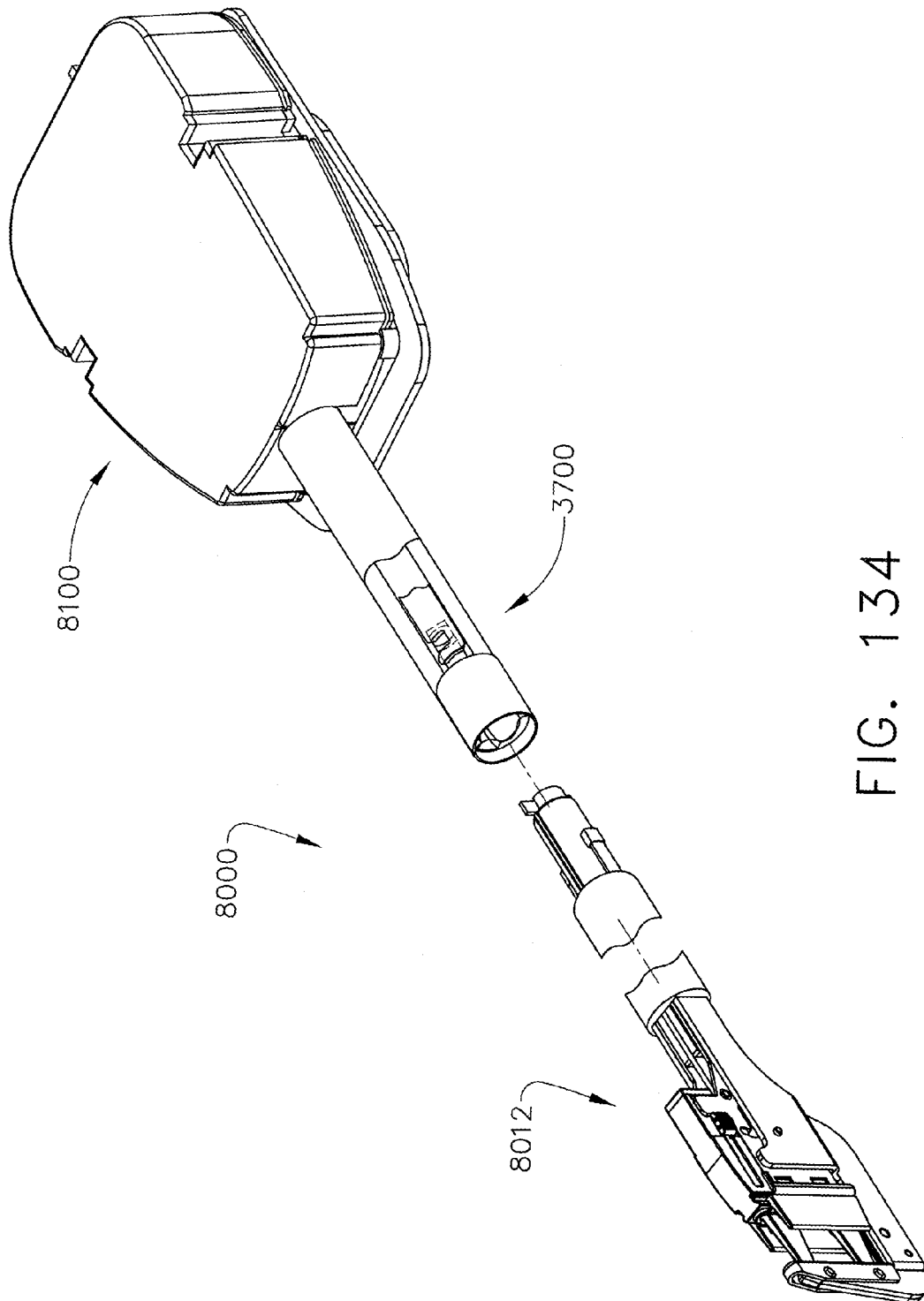


FIG. 134

1

ROBOTICALLY-CONTROLLED SURGICAL INSTRUMENT WITH SELECTIVELY ARTICULATABLE END EFFECTOR

CROSS-REFERENCE TO RELATED APPLICATIONS

This non-provisional patent application is a continuation patent application of and claims the benefit from U.S. patent application Ser. No. 13/118,194, filed May 27, 2011, now U.S. Pat. No. 8,992,422, the disclosure of which is herein incorporated by reference in its entirety and which is a continuation-in-part patent application of and claims the benefit of U.S. patent application Ser. No. 11/277,324, filed Mar. 23, 2006, U.S. Patent Publication No. US 2007/0225562-A1, the disclosure of which is herein incorporated by reference in its entirety.

FIELD OF THE INVENTION

The present invention relates broadly to methods and devices for controlling movement of a working end of a surgical device.

BACKGROUND OF THE INVENTION

Endoscopic surgical instruments are often preferred over traditional open surgical devices since the use of a natural orifice tends to reduce the post-operative recovery time and complications. Consequently, significant development has gone into a range of endoscopic surgical instruments that are suitable for precise placement of a working end of a tool at a desired surgical site through a natural orifice. These tools can be used to engage and/or treat tissue in a number of ways to achieve a diagnostic or therapeutic effect.

Endoscopic surgery requires that the shaft of the device be flexible while still allowing the working end to be articulated to angularly orient the working end relative to the tissue, and in some cases to be actuated to fire or otherwise effect movement of the working end. Integration of the controls for articulating and actuating a working end of an endoscopic device tend to be complicated by the use of a flexible shaft and by the size constraints of an endoscopic instrument. Generally, the control motions are all transferred through the shaft as longitudinal translations, which can interfere with the flexibility of the shaft. There is also a desire to lower the force necessary to articulate and/or actuate the working end to a level that all or a great majority of surgeons can handle. One known solution to lower the force-to-fire is to use electrical motors. However, surgeons typically prefer to experience feedback from the working end to assure proper operation of the end effector. The user-feedback effects are not suitably realizable in present motor-driven devices.

Accordingly, there remains a need for improved methods and devices for controlling movement of a working end of an endoscopic surgical device.

SUMMARY OF THE INVENTION

In one embodiment, a surgical device is provided having an elongate shaft with a proximal end having a handle movably coupled thereto, and a distal end having a flexible neck extending therefrom. The handle and the flexible neck can be operatively associated such that movement of the handle is effective to cause the flexible neck to articulate in multiple planes. In certain exemplary embodiments, movement of the handle can be mimicked by the flexible neck. The device can

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also include an actuator extending between the handle and the flexible neck and configured to transfer movement from the handle to the flexible neck.

The handle of the device can have a variety of configurations, but in one embodiment the handle can be adapted to articulate relative to the proximal end of the elongate shaft. For example, the handle can be coupled to the proximal end of the elongate shaft by a joint, such as a ball and socket joint, a hinge joint, or a flexing joint. The actuator of the device can also have a variety of configurations, and in one embodiment the actuator can be at least one cable extending along a length of the elongate shaft. For example, the device can include a plurality of cables extending along a length of the shaft and equally spaced apart from one another around a circumference of the actuator. The cables are configured to slide relative to an axis of the elongate shaft and to apply tension to the elongate shaft to cause at least a portion of the elongate shaft to flex and bend. The handle and/or the cables can also optionally include a locking mechanism associated therewith and configured to maintain the handle and/or cables in a fixed position. In an exemplary embodiment, the elongate shaft is configured to passively flex and bend when it is inserted through a tortuous lumen.

The elongate shaft can also have a variety of configurations, but in one embodiment the device can be in the form of a surgical stapler and the elongate shaft can include an end effector coupled to a distal end of the flexible neck and adapted to engage tissue and deliver at least one fastener into the engaged tissue. The handle and the end effector can be coupled such that movement of the handle is mimicked by the end effector. For example, the handle can be coupled to the proximal end of the elongate shaft by a joint, such as a ball and socket joint, a hinge joint, and a flexing joint, and the flexible neck can be formed on or coupled to the end effector to allow the end effector to proportionally mimic movement of the handle. The device can also include an actuator extending between the handle and the end effector and configured to transfer movement from the handle to the flexible neck. The actuator can be, for example, a plurality of cables extending along a length of the elongate shaft. The cables can be equally spaced apart from one another around a circumference of the elongate shaft.

In another embodiment, the device can be in the form of an accessory channel and the elongate shaft can be in the form of a tube having an inner lumen adapted to receive a tool there-through. The flexible neck extending from the distal end of the elongate tube can be configured to flex to orient a tool extending through the elongate tube. The flexible neck can have a variety of configurations, but in one embodiment it includes a plurality of slits formed therein to facilitate flexion thereof. The slits can be configured to cause the flexible neck to flex into a desired orientation. For example, the flexible neck can include a distal region of slits and a proximal region of slits, and the slits can be configured such that tension applied to the flexible neck will cause the flexible neck to bend at the proximal and distal regions. A handle can be coupled to the proximal end of the elongate tube, and it can operatively associate with the flexible neck such that movement of the handle is mimicked by the flexible neck. The handle can also have a variety of configurations, and in one embodiment the handle can include a stationary member and a movable member adapted to articulate relative to the stationary member. The movable member can be coupled to the stationary member by a joint, such as a ball and socket joint, a hinge joint, and a flexing joint. In use, the accessory channel can be configured to releasably attach to an endoscope. For example, a mating element can be formed on and extend

along a length of an external surface thereof for mating to a complementary mating element formed on a sleeve adapted to receive an endoscope. The device can also include an actuator extending between the handle and the flexible neck. The actuator can be configured to transfer movement from the handle to the flexible neck. In certain exemplary embodiments, the actuator is in the form of at least one cable extending along a length of the elongate tube. Where the actuator includes multiple cables, the cables are preferably equally spaced apart from one another around a circumference of the elongate tube. The cables can extend along the elongate tube using various techniques. For example, the elongate tube can include at least one lumen formed in a sidewall thereof and extending along the length thereof, and the cable(s) can be slidably disposed within the lumen(s). The device can also include a locking mechanism positioned to engage at least one of the handle and the cable(s) to lock the handle and the cable(s) in a fixed position.

The present invention also provides an endoscopic system having an elongate sleeve configured to be disposed around an endoscope, and an accessory channel removably matable to the elongate sleeve. The accessory channel can have an inner lumen extending therethrough between proximal and distal ends thereof for receiving a tool, a flexible portion formed on a distal portion thereof and being made flexible by a plurality of slits formed therein, and at least one handle coupled to the proximal end thereof and operatively associated with the flexible portion such that the handle(s) is configured to cause the flexible portion to articulate in at least one plane. The handle(s) can be operatively associated with the flexible portion by at least one cable, and the handle(s) can be configured to axially move the cable(s) relative to the accessory channel to cause the cable(s) to apply tension to the flexible portion of the accessory channel such that the flexible portion articulates in at least one plane. In one embodiment, the device can include a single handle configured to cause the flexible portion to articulate in multiple planes. The single handle can include a stationary member coupled to the proximal end of the accessory channel, and a movable member configured to articulate relative to the stationary member. The single handle and the flexible portion can be operatively associated such that movement of the single handle is mimicked by the flexible portion. In another embodiment, the handle can include a first member configured to cause the flexible portion to articulate in a first plane, and a second member configured to cause the flexible portion to articulate in a second plane. In particular, the handle can include a stationary member coupled to the proximal end of the accessory channel, and the first and second members can be rotatably coupled to the stationary member. The device can further include a first spool coupled to the first member and having at least one cable extending therefrom and coupled to the flexible portion, and a second spool coupled to the second member and having at least one cable extending therefrom and coupled to the flexible portion. The first and second members can be effective to rotate the first and second spools and thereby move the cables axially to cause the flexible portion to articulate.

The surgical devices disclosed herein can also include a variety of other features. For example, the device can include an optical image gathering unit disposed on a distal end of the elongate shaft. The optical image gathering unit can be adapted to acquire images during endoscopic procedures. An image display screen can be disposed on a proximal portion of the device and adapted to communicate with the optical image gathering unit to display the acquired images. In other embodiments, the end effector of the device can include a

cartridge removably disposed therein and containing a plurality of staples for stapling tissue and a blade for cutting stapled tissue.

In other aspects, a surgical method is provided and includes inserting an elongate shaft into a body lumen to position a flexible neck coupled to a distal end of the elongate shaft adjacent to tissue to be treated, and moving a handle pivotally coupled to a proximal end of the elongate shaft to cause the flexible neck to mimic the motion of the handle. The flexible neck can minor movement of the handle, or movement of the flexible neck can directly correspond to movement of the handle. In certain exemplary embodiments, the movement is proportional.

In one exemplary embodiment, an end effector coupled to a distal end of the elongate shaft is positioned adjacent to tissue to be fastened, and a handle pivotally coupled to a proximal end of the elongate shaft is moved to cause the end effector to proportionally mimic the motion of the handle. The end effector can mirror movement of the handle, or movement of the end effector can directly correspond to movement of the handle. In an exemplary embodiment, the handle is pivotally articulated about the proximal end of the elongate shaft to cause the end effector to mimic the motion of the handle. The method can further include engaging tissue between opposed jaws of the end effector, and driving at least one fastener from the end effector into the tissue. Tissue can be engaging by moving a translating member formed on the handle from a first position to a second position to close the opposed jaws, and the fasteners can be fired by rotating a rotatable member formed on the handle to actuate a driver mechanism disposed within the end effector to cause the driver mechanism to drive a plurality of fasteners into the tissue. In another embodiment, prior to moving the translating member from the first position to the second position, the rotatable member can be rotated to rotate the end effector relative to the flexible neck without actuating the driver mechanism.

In yet another aspect, the elongate shaft can be in the form of an accessory channel that is slidably mated to an endoscope disposed within a body cavity to position a distal end of the accessory channel in proximity to a distal end of the endoscope. A tool is inserted through a lumen in the accessory channel such that the tool extends distally beyond the distal end of the accessory channel, and a handle coupled to a proximal end of the accessory channel can be moved to cause a flexible neck on the distal end of the accessory channel to articulate, thereby causing a working end of the tool to be oriented in a desired position. The handle can be moved by pivotally articulating the handle relative to the accessory channel, or alternatively is can be moved by rotating at least one rotatable member on the handle.

In accordance with other general aspects of the various embodiments of the present invention, there is provided a surgical device that includes an end effector that is configured to perform at least one surgical procedure in response to at least one control motion applied thereto from a control unit of a robotic system. An elongate shaft is coupled to the end effector and is configured to facilitate the transmission of at least one control motion to the end effector from the robotic system. The elongate shaft defines a shaft axis and is configured to facilitate articulation of the end effector in two planes that are substantially perpendicular to the shaft axis upon manipulation of the control unit relative to the elongate shaft such that movement of the control unit is mimicked by the end effector.

In accordance with still other general aspects of various embodiments of the present invention, there is provided an accessory channel for releasable attachment to an endoscope.

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In various embodiments, the accessory channel comprises an elongate tube that has an inner lumen extending therethrough between proximal and distal ends thereof for receiving a tool. The accessory channel further comprises a flexible neck that extends from the distal end of the elongate tube and is configured to flex to orient a tool extending through the elongate tube. The flexible neck is configured to be operably coupled to at least a portion of a robotic system such that movement of the at least a portion of the robotic system is mimicked by the flexible neck.

In accordance with still other general aspects of various embodiments of the present invention, there is provided an endoscopic system for use with a robotic system. In various forms, the endoscopic system comprises an elongate sleeve that is configured to be disposed around an endoscope. An accessory channel is removably matable to the elongate sleeve. The accessory channel has an inner lumen extending therethrough between proximal and distal ends thereof for receiving a tool. A flexible portion is formed on a distal portion thereof and is made flexible by a plurality of slits formed therein. The proximal end of the accessory channel is configured for operable attachment to at least a portion of the robotic system such that actuation of the at least a portion of the robotic system causes the flexible portion to articulate in at least one plane.

BRIEF DESCRIPTION OF THE DRAWINGS

The invention will be more fully understood from the following detailed description taken in conjunction with the accompanying drawings, in which:

FIG. 1A is a perspective view of one embodiment of a surgical stapling and cutting device, showing a working end of the device in an initial position;

FIG. 1B is a perspective view of the surgical stapling and cutting device of FIG. 1A, showing the working end of the device in an articulated position;

FIG. 2 is a perspective view of a portion of a flexible neck of the device shown in FIGS. 1A and 1B;

FIG. 3A is a perspective view of a distal portion of the device shown in FIGS. 1A and 1B, showing an end effector and the flexible neck of FIG. 2 coupled thereto;

FIG. 3B is a cross-sectional view taken across line 3B-3B of the end effector shown in FIG. 3A;

FIG. 4A is a perspective view of a proximal portion of the device shown in FIGS. 1A and 1B, showing a handle movably coupled to a proximal end of a shaft of the device;

FIG. 4B is an exploded view of the proximal portion of the device shown in FIG. 4A;

FIG. 5 is a perspective view of coupling element disposed between the flexible neck and elongate shaft of the device shown in FIGS. 1A and 1B, showing an optical image gathering apparatus;

FIG. 6 is a perspective view of the handle of the device shown in FIGS. 1A and 1B, showing an image display screen;

FIG. 7 is a perspective view of an accessory channel for use with an endoscope;

FIG. 8A is a perspective view of a flexible neck of the device shown in FIG. 7;

FIG. 8B is a perspective view of the flexible neck shown in FIG. 8A, showing the neck articulated in a first direction;

FIG. 8C is a perspective view of the flexible neck shown in FIG. 8A, showing the neck articulated in a second direction;

FIG. 9A is a perspective view of another embodiment of a flexible neck for use with an accessory channel;

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FIG. 9B is a perspective view of the flexible neck shown in FIG. 9A, showing the neck articulated in a first direction;

FIG. 9C is a perspective view of the flexible neck shown in FIG. 9A, showing the neck articulated in a second direction;

FIG. 10 is a perspective view of a plurality of cable actuators for use with the device of FIG. 7;

FIG. 11 is a cross-sectional view of a shaft of the accessory channel of FIG. 7;

FIG. 12 is a perspective view of one embodiment of an end cap for use with the accessory channel of FIG. 7;

FIG. 13A is an exploded view of the handle and a proximal portion of the elongate shaft of the device shown in FIG. 7;

FIG. 13B is a cross-sectional view of the handle and the proximal portion of the elongate shaft of FIG. 13A in an assembled configuration;

FIG. 14A is a perspective view of another embodiment of an accessory channel;

FIG. 14B is a cross-sectional view of the accessory channel shown in FIG. 14A;

FIG. 15A is a side view of a handle assembly of the device shown in FIGS. 14A and 14B;

FIG. 15B is an exploded view of the handle assembly of FIG. 15A;

FIG. 16A is a perspective view of one embodiment of a locking mechanism;

FIG. 16B is a perspective view of the locking mechanism of FIG. 16A coupled to the surgical stapling and cutting device of FIGS. 1A and 1B;

FIG. 17 is a perspective view of one robotic controller embodiment;

FIG. 18 is a perspective view of one robotic surgical arm cart/manipulator of a robotic system operably supporting a plurality of surgical tool embodiments of the present invention;

FIG. 19 is a side view of the robotic surgical arm cart/manipulator depicted in FIG. 18;

FIG. 20 is a perspective view of an exemplary cart structure with positioning linkages for operably supporting robotic manipulators that may be used with various surgical tool embodiments of the present invention;

FIG. 21 is a perspective view of a surgical tool embodiment of the present invention;

FIG. 22 is an exploded assembly view of an adapter and tool holder arrangement for attaching various surgical tool embodiments to a robotic system;

FIG. 23 is a side view of the adapter shown in FIG. 22;

FIG. 24 is a bottom view of the adapter shown in FIG. 22;

FIG. 25 is a top view of the adapter of FIGS. 22 and 23;

FIG. 26 is a partial bottom perspective view of the surgical tool embodiment of FIG. 21;

FIG. 27 is a partial exploded view of a portion of an articulatable surgical end effector embodiment of the present invention;

FIG. 28 is a perspective view of the surgical tool embodiment of FIG. 26 with the tool mounting housing removed;

FIG. 29 is a rear perspective view of the surgical tool embodiment of FIG. 26 with the tool mounting housing removed;

FIG. 30 is a front perspective view of the surgical tool embodiment of FIG. 26 with the tool mounting housing removed;

FIG. 31 is a partial exploded perspective view of the surgical tool embodiment of FIG. 30;

FIG. 32 is a partial cross-sectional side view of the surgical tool embodiment of FIG. 26;

FIG. 33 is an enlarged cross-sectional view of a portion of the surgical tool depicted in FIG. 32;

FIG. 34 is an exploded perspective view of a portion of the tool mounting portion of the surgical tool embodiment depicted in FIG. 26;

FIG. 35 is an enlarged exploded perspective view of a portion of the tool mounting portion of FIG. 34;

FIG. 36 is a partial cross-sectional view of a portion of the elongated shaft assembly of the surgical tool of FIG. 26;

FIG. 37 is a side view of a half portion of a closure nut embodiment of a surgical tool embodiment of the present invention;

FIG. 38 is a perspective view of another surgical tool embodiment of the present invention;

FIG. 39 is a cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 38 with the anvil in the open position and the closure clutch assembly in a neutral position;

FIG. 40 is another cross-sectional side view of the surgical end effector and elongated shaft assembly shown in FIG. 39 with the clutch assembly engaged in a closure position;

FIG. 41 is another cross-sectional side view of the surgical end effector and elongated shaft assembly shown in FIG. 39 with the clutch assembly engaged in a firing position;

FIG. 42 is a top view of a portion of a tool mounting portion embodiment of the present invention;

FIG. 43 is a perspective view of another surgical tool embodiment of the present invention;

FIG. 44 is a cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 43 with the anvil in the open position;

FIG. 45 is another cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 43 with the anvil in the closed position;

FIG. 46 is a perspective view of a closure drive nut and portion of a knife bar embodiment of the present invention;

FIG. 47 is a top view of another tool mounting portion embodiment of the present invention;

FIG. 48 is a perspective view of another surgical tool embodiment of the present invention;

FIG. 49 is a cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 48 with the anvil in the open position;

FIG. 50 is another cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 49 with the anvil in the closed position;

FIG. 51 is a cross-sectional view of a mounting collar embodiment of a surgical tool embodiment of the present invention showing the knife bar and distal end portion of the closure drive shaft;

FIG. 52 is a cross-sectional view of the mounting collar embodiment of FIG. 51;

FIG. 53 is a top view of another tool mounting portion embodiment of another surgical tool embodiment of the present invention;

FIG. 53A is an exploded perspective view of a portion of a gear arrangement of another surgical tool embodiment of the present invention;

FIG. 53B is a cross-sectional perspective view of the gear arrangement shown in FIG. 53A;

FIG. 54 is a cross-sectional side view of a portion of a surgical end effector and elongated shaft assembly of another surgical tool embodiment of the present invention employing a pressure sensor arrangement with the anvil in the open position;

FIG. 55 is another cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 54 with the anvil in the closed position;

FIG. 56 is a side view of a portion of another surgical tool embodiment of the present invention in relation to a tool holder portion of a robotic system with some of the components thereof shown in cross-section;

FIG. 57 is a side view of a portion of another surgical tool embodiment of the present invention in relation to a tool holder portion of a robotic system with some of the components thereof shown in cross-section;

FIG. 58 is a side view of a portion of another surgical tool embodiment of the present invention with some of the components thereof shown in cross-section;

FIG. 59 is a side view of a portion of another surgical end effector embodiment of a portion of a surgical tool embodiment of the present invention with some components thereof shown in cross-section;

FIG. 60 is a side view of a portion of another surgical end effector embodiment of a portion of a surgical tool embodiment of the present invention with some components thereof shown in cross-section;

FIG. 61 is a side view of a portion of another surgical end effector embodiment of a portion of a surgical tool embodiment of the present invention with some components thereof shown in cross-section;

FIG. 62 is an enlarged cross-sectional view of a portion of the end effector of FIG. 61;

FIG. 63 is another cross-sectional view of a portion of the end effector of FIGS. 61 and 62;

FIG. 64 is a cross-sectional side view of a portion of a surgical end effector and elongated shaft assembly of another surgical tool embodiment of the present invention with the anvil in the open position;

FIG. 65 is an enlarged cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIG. 64;

FIG. 66 is another cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of FIGS. 64 and 65 with the anvil thereof in the closed position;

FIG. 67 is an enlarged cross-sectional side view of a portion of the surgical end effector and elongated shaft assembly of the surgical tool embodiment of FIGS. 64-66;

FIG. 68 is a top view of a tool mounting portion embodiment of a surgical tool embodiment of the present invention;

FIG. 69 is a perspective assembly view of another surgical tool embodiment of the present invention;

FIG. 70 is a front perspective view of a disposable loading unit arrangement that may be employed with various surgical tool embodiments of the present invention;

FIG. 71 is a rear perspective view of the disposable loading unit of FIG. 70;

FIG. 72 is a bottom perspective view of the disposable loading unit of FIGS. 70 and 71;

FIG. 73 is a bottom perspective view of another disposable loading unit embodiment that may be employed with various surgical tool embodiments of the present invention;

FIG. 74 is an exploded perspective view of a mounting portion of a disposable loading unit depicted in FIGS. 70-72;

FIG. 75 is a perspective view of a portion of a disposable loading unit and an elongated shaft assembly embodiment of a surgical tool embodiment of the present invention with the disposable loading unit in a first position;

FIG. 76 is another perspective view of a portion of the disposable loading unit and elongated shaft assembly of FIG. 75 with the disposable loading unit in a second position;

FIG. 77 is a cross-sectional view of a portion of the disposable loading unit and elongated shaft assembly embodiment depicted in FIGS. 75 and 76;

FIG. 78 is another cross-sectional view of the disposable loading unit and elongated shaft assembly embodiment depicted in FIGS. 75-77;

FIG. 79 is a partial exploded perspective view of a portion of another disposable loading unit embodiment and an elongated shaft assembly embodiment of a surgical tool embodiment of the present invention;

FIG. 80 is a partial exploded perspective view of a portion of another disposable loading unit embodiment and an elongated shaft assembly embodiment of a surgical tool embodiment of the present invention;

FIG. 81 is another partial exploded perspective view of the disposable loading unit embodiment and an elongated shaft assembly embodiment of FIG. 80;

FIG. 82 is a top view of another tool mounting portion embodiment of a surgical tool embodiment of the present invention;

FIG. 83 is a side view of another surgical tool embodiment of the present invention with some of the components thereof shown in cross-section and in relation to a robotic tool holder of a robotic system;

FIG. 84 is an exploded assembly view of a surgical end effector embodiment that may be used in connection with various surgical tool embodiments of the present invention;

FIG. 85 is a side view of a portion of a cable-driven system for driving a cutting instrument employed in various surgical end effector embodiments of the present invention;

FIG. 86 is a top view of the cable-driven system and cutting instrument of FIG. 85;

FIG. 87 is a top view of a cable drive transmission embodiment of the present invention in a closure position;

FIG. 88 is another top view of the cable drive transmission embodiment of FIG. 87 in a neutral position;

FIG. 89 is another top view of the cable drive transmission embodiment of FIGS. 87 and 88 in a firing position;

FIG. 90 is a perspective view of the cable drive transmission embodiment in the position depicted in FIG. 87;

FIG. 91 is a perspective view of the cable drive transmission embodiment in the position depicted in FIG. 88;

FIG. 92 is a perspective view of the cable drive transmission embodiment in the position depicted in FIG. 89;

FIG. 93 is a perspective view of another surgical tool embodiment of the present invention;

FIG. 94 is a side view of a portion of another cable-driven system embodiment for driving a cutting instrument employed in various surgical end effector embodiments of the present invention;

FIG. 95 is a top view of the cable-driven system embodiment of FIG. 94;

FIG. 96 is a top view of a tool mounting portion embodiment of another surgical tool embodiment of the present invention;

FIG. 97 is a top cross-sectional view of another surgical tool embodiment of the present invention;

FIG. 98 is a cross-sectional view of a portion of a surgical end effector embodiment of a surgical tool embodiment of the present invention;

FIG. 99 is a cross-sectional end view of the surgical end effector of FIG. 103 taken along line 99-99 in FIG. 98;

FIG. 100 is a perspective view of the surgical end effector of FIGS. 98 and 99 with portions thereof shown in cross-section;

FIG. 101 is a side view of a portion of the surgical end effector of FIGS. 98-100;

FIG. 102 is a perspective view of a sled assembly embodiment of various surgical tool embodiments of the present invention;

FIG. 103 is a cross-sectional view of the sled assembly embodiment of FIG. 102 and a portion of the elongated channel of FIG. 101;

FIGS. 104-109 diagrammatically depict the sequential firing of staples in a surgical tool embodiment of the present invention;

FIG. 110 is a partial perspective view of a portion of a surgical end effector embodiment of the present invention;

FIG. 111 is a partial cross-sectional perspective view of a portion of a surgical end effector embodiment of a surgical tool embodiment of the present invention;

FIG. 112 is another partial cross-sectional perspective view of the surgical end effector embodiment of FIG. 111 with a sled assembly axially advancing therethrough;

FIG. 113 is a perspective view of another sled assembly embodiment of another surgical tool embodiment of the present invention;

FIG. 114 is a partial top view of a portion of the surgical end effector embodiment depicted in FIGS. 111 and 112 with the sled assembly axially advancing therethrough;

FIG. 115 is another partial top view of the surgical end effector embodiment of FIG. 114 with the top surface of the surgical staple cartridge omitted for clarity;

FIG. 116 is a partial cross-sectional side view of a rotary driver embodiment and staple pusher embodiment of the surgical end effector depicted in FIGS. 111 and 112;

FIG. 117 is a perspective view of an automated reloading system embodiment of the present invention with a surgical end effector in extractive engagement with the extraction system thereof;

FIG. 118 is another perspective view of the automated reloading system embodiment depicted in FIG. 117;

FIG. 119 is a cross-sectional elevational view of the automated reloading system embodiment depicted in FIGS. 117 and 118;

FIG. 120 is another cross-sectional elevational view of the automated reloading system embodiment depicted in FIGS. 117-119 with the extraction system thereof removing a spent surgical staple cartridge from the surgical end effector;

FIG. 121 is another cross-sectional elevational view of the automated reloading system embodiment depicted in FIGS. 117-120 illustrating the loading of a new surgical staple cartridge into a surgical end effector;

FIG. 122 is a perspective view of another automated reloading system embodiment of the present invention with some components shown in cross-section;

FIG. 123 is an exploded perspective view of a portion of the automated reloading system embodiment of FIG. 122;

FIG. 124 is another exploded perspective view of the portion of the automated reloading system embodiment depicted in FIG. 123;

FIG. 125 is a cross-sectional elevational view of the automated reloading system embodiment of FIGS. 122-124;

FIG. 126 is a cross-sectional view of an orientation tube embodiment supporting a disposable loading unit therein;

FIG. 127 is a perspective view of another surgical tool embodiment of the present invention;

FIG. 128 is a partial perspective view of an articulation joint embodiment of a surgical tool embodiment of the present invention;

FIG. 129 is a perspective view of a closure tube embodiment of a surgical tool embodiment of the present invention;

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FIG. 130 is a perspective view of the closure tube embodiment of FIG. 129 assembled on the articulation joint embodiment of FIG. 128;

FIG. 131 is a top view of a portion of a tool mounting portion embodiment of a surgical tool embodiment of the present invention;

FIG. 132 is a perspective view of an articulation drive assembly embodiment employed in the tool mounting portion embodiment of FIG. 131;

FIG. 133 is a perspective view of another surgical tool embodiment of the present invention; and

FIG. 134 is a perspective view of another surgical tool embodiment of the present invention.

DETAILED DESCRIPTION

Applicant of the present application also owns the following patent applications that were filed on May 27, 2011 and which are each herein incorporated by reference in their respective entireties:

U.S. patent application Ser. No. 13/118,259, entitled "Surgical Instrument With Wireless Communication Between a Control Unit of a Robotic System and Remote Sensor"; now U.S. Pat. No. 8,684,253;

U.S. patent application Ser. No. 13/118,210, entitled "Robotically-Controlled Disposable Motor Driven Loading Unit"; now U.S. Pat. No. 8,752,749;

U.S. patent application Ser. No. 13/118,253, entitled "Robotically-Controlled Motorized Surgical Instrument"; now U.S. Patent Application Publication No. 2011/0295269;

U.S. patent application Ser. No. 13/118,278, entitled "Robotically-Controlled Surgical Stapling Devices That Produce Formed Staples Having Different Lengths"; now U.S. Patent Application Publication No. 2011/0290851;

U.S. patent application Ser. No. 13/118,190, entitled "Robotically-Controlled Motorized Cutting and Fastening Instrument"; now U.S. Patent Application Publication No. 2011/0288573;

U.S. patent application Ser. No. 13/118,223, entitled "Robotically-Controlled Shaft Based Rotary Drive Systems For Surgical Instruments"; now U.S. Pat. No. 8,931,682;

U.S. patent application Ser. No. 13/118,263, entitled "Robotically-Controlled Surgical Instrument Having Recording Capabilities"; now U.S. Patent Application Publication No. 2011/0295295;

U.S. patent application Ser. No. 13/118,272, entitled "Robotically-Controlled Surgical Instrument With Force Feedback Capabilities"; now U.S. Patent Application Publication No. 2011/0290856;

U.S. patent application Ser. No. 13/118,246, entitled "Robotically-Driven Surgical Instrument With E-Beam Driver"; now U.S. Pat. No. 9,060,770; and

U.S. patent application Ser. No. 13/118,241, entitled "Surgical Stapling Instruments With Rotatable Staple Deployment Arrangements"; now U.S. Pat. No. 9,072,535.

Certain exemplary embodiments will now be described to provide an overall understanding of the principles of the structure, function, manufacture, and use of the devices and methods disclosed herein. One or more examples of these embodiments are illustrated in the accompanying drawings. Those of ordinary skill in the art will understand that the devices and methods specifically described herein and illustrated in the accompanying drawings are non-limiting exem-

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plary embodiments and that the scope of the various embodiments of the present invention is defined solely by the claims. The features illustrated or described in connection with one exemplary embodiment may be combined with the features of other embodiments. Such modifications and variations are intended to be included within the scope of the present invention.

Uses of the phrases "in various embodiments," "in some embodiments," "in one embodiment", or "in an embodiment", or the like, throughout the specification are not necessarily all referring to the same embodiment. Furthermore, the particular features, structures, or characteristics of one or more embodiments may be combined in any suitable manner in one or more other embodiments. Such modifications and variations are intended to be included within the scope of the present invention.

The present invention provides method and devices for controlling a working end of an endoscopic surgical device. In general, the endoscopic surgical devices include an elongate shaft having a distal working end with a flexible neck, and a proximal end with a handle for controlling movement of the flexible neck on the distal working end. In certain exemplary embodiments, this can be achieved using, for example, one or more cables that extend between the handle and the flexible neck such that movement of the handle applies a force to one or more of the cables to cause the flexible portion to flex and thereby move the working end of the device. Various other features are also provided to facilitate use of the device. A person skilled in the art will appreciate that the particular device being controlled, and the particular configuration of the working end, can vary and that the various control techniques described herein can be used on virtually any surgical device in which it is desirable to control movement of the working end.

FIGS. 1A and 1B illustrate one exemplary embodiment of a technique for controlling articulation of the end effector, and in particular for causing the end effector to mimic and simultaneously move with the handle. In this embodiment, the device is in the form of a linear stapling and cutting device 10 for applying multiple linear rows of staples to tissue and for cutting the stapled tissue. As shown, the device 10 generally includes an elongate shaft 12 having a proximal end 12a with a handle 14 coupled thereto, and a distal, working end 12a having an end effector 16 coupled thereto or formed thereon, as will be discussed in more detail below. In use, the end effector 16 is configured to mimic movement of the handle 14. Mimicking motion between the handle 14 and the end effector 16 can generally be achieved using an actuator (not shown) that extends between the handle 14 and the end effector 16, and that is effective to transfer forces from the handle 14 to the end effector 16. In an exemplary embodiment, the actuator is in the form of several cables that are spaced around a circumference of the elongate shaft 12, and that extend along the length of the elongate shaft 12. Movement of the handle 14 about the proximal end 12a of the shaft 12 will apply a force to one or more of the cables to cause the cables to apply a force to the end effector 16, thereby causing the end effector 16 to mimic the motion of the handle 14. Mimicking motion can include corresponding motion, whereby the end effector 16 moves in the same direction and orientation as the handle 14, or mirrored motion, whereby the end effector 16 moves in an opposite direction and orientation as the handle 14. The mimicking motion can also be proportional to the movement of the handle.

The elongate shaft 12 of the device 10 can have a variety of configurations. For example, it can be solid or hollow, and it can be formed from a single component or multiple segments.

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As shown in FIG. 2, the elongate shaft 12 is hollow and is formed from multiple connecting segments to allow the elongate shaft 12 to flex. The flexibility of the shaft 12, as well as a relatively small diameter, allows the shaft 12 to be used in endoscopic procedures, whereby the device is introduced

translumenally through a natural orifice. The shaft can also vary in length depending on the intended application. FIG. 2 further illustrates one exemplary embodiment of an actuator 22 in the form of several cables 34a, 34b, 34c, 34d that are spaced around a circumference of the elongate shaft 12, and that extend along the length of the elongate shaft 12. The number and location of the cables can vary. For example, three cables can be spaced approximately 120° apart from one another around the circumference of the shaft 12. In the embodiment shown in FIG. 2, four cables 34a, 34b, 34c, 34d are spaced approximately 90° apart from one another around the circumference of the shaft 12. Each cable 34a-d can extend through a pathway, such as a lumen, formed on, in, or around the elongate shaft 12. FIG. 2 illustrates each cable 34a-d extending through a cut-out formed on an external surface of each segment of the shaft 12. Thus, each segment includes four cut-outs spaced equidistant around the circumference of the shaft 12 to maintain the cables 34a-d equidistant from one another. The cut-outs preferably have a size that is effective to retain the cables 34a-d therein while allowing the cables 34a-d to freely slide relative to the shaft 12.

The distal end of the cables 34a-d can be mated to the end effector 16 to control movement of the end effector 16. While the end effector 16 can have a variety of configurations, and various end effectors known in the art can be used, FIG. 3A illustrates one exemplary embodiment of an end effector 16 which generally includes opposed first and second jaws 18, 20 that are adapted to receive tissue therebetween. The first jaw 18 is adapted to contain a staple cartridge having multiple staples disposed therein and configured to be driven into tissue, and the second jaw 20 forms an anvil for deforming the staples. The particular configuration and the basic operation of the end effector 16 can vary, and various end effectors 16 known in the art can be used. By way of non-limiting example, U.S. Pat. No. 6,978,921 entitled "Surgical Stapling Instrument Incorporating an E-Beam Firing Mechanism," which is incorporated herein in its entirety, discloses one embodiment of an end effector that can be used with the present invention.

In order to allow movement of the end effector 16 relative to the elongate shaft 12, the end effector 16 can be movably coupled to the distal end 12b of the elongate shaft 12. For example, the end effector 16 can be pivotally coupled to the distal end 12b of the elongate shaft 12 by a pivoting or rotating joint. Alternatively, the end effector 16 can include a flexible neck 26 formed thereon, as shown, for allowing movement of the end effector 16 relative to the elongate shaft 12. The flexible neck 26 can be formed integrally with the distal end 12b of the shaft 12 and/or the proximal end of the jaws 18, 20, or it can be a separate member that extends between the shaft 12 and the jaws 18, 20. As shown in FIG. 3A, the flexible neck 26 includes a first coupler 28 for mating the flexible neck 26 to the proximal end of the opposed jaws 18, 20, and a second coupler 30 for mating the flexible neck 26 to the distal end of the elongate shaft 12. The couplers 28, 30 can be removably or fixedly mated to the flexible neck 26 and/or to the jaws 18, 20 and the shaft 12. The couplers 28, 30 also function to house certain components of the end effector 16. For example, the first coupler 28 can function to anchor the cables therein, as will be discussed below, and it can also function to house a gear and driver assembly for actuating (e.g., closing and firing) the jaws 18, 20.

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In order to facilitate flexion of the flexible neck 26, the neck 26 can include one or more slits 32 formed therein. The quantity, location, and size of the slits 32 can vary to obtain a desired flexibility. In the embodiment shown in FIG. 3A, the flexible neck 26 includes multiple rows of slits 32, each row extending radially around the flexible neck 26 and each row being spaced axially along the length of the flexible neck 26. Each row of slits contains two slits extending around the circumference of the neck 26, and each row of slits 32 is axially offset from one another. As a result, the flexible neck 26 includes alternating slits 32. A person skilled in the particular pattern of the slits 32 can vary, and that FIG. 3A merely illustrates one pattern for forming slits 32 to allow flexion of the flexible neck 26. Other exemplary slit configurations will be discussed in more detail below.

As indicated above, the cables 34a-d can be coupled to the end effector 16 to allow the end effector 16 to move in coordination with the handle 14. The connecting location of the cables 34a-d with the end effector 16 can vary depending on the desired movement. In the illustrated embodiment, the distal end of the cables 34a-d is connected to the distal end of the flexible neck 26, and in particular they extend into and connect to the first coupler 28. FIG. 3B illustrates a cross-sectional view of the first coupler 28 showing four bores 28a, 28b, 28c, 28d for receiving the four cables 34a, 34b, 34c, 34d, respectively. Virtually any technique known in the art can be used to connect the cables 34a-d to the coupler 28 including, for example, mechanical mating techniques such as adhesives, an interference fit, a ball-and-socket connection, threads, etc. In use, the connection of the cables 34a-d at the distal end of the flexible neck 26 will allow the cables 34a-d to apply a tension to the flexible neck 26 when an axial force is applied to the cables 34a-d by the handle 14. This tension will cause the neck 26 to flex in a direction dictated by the amount of tension applied to each cable 34a-d, as will be discussed in more detail below.

The handle 14 of the device 10 can be used to control movement of the end effector 16, and in particular to articulate the end effector 16 and thus angularly orient it relative to a longitudinal axis A of the elongate shaft 12. While the handle 14 can have a variety of configurations, in one exemplary embodiment the handle 14 is movably coupled to the proximal end 12a of the elongate shaft 12 such that movement of the handle 14 can be mimicked by the end effector 16. While various techniques can be used to movably couple the handle 14 to the shaft 12, in the embodiment shown in FIGS. 4A-4C, a ball-and-socket connection is formed between the handle 14 and the proximal end 12a of the elongate shaft 12. As best shown in FIG. 4B, the proximal end 12a of the elongate shaft 12 includes a socket 24 formed therein, and the handle 14 includes a hemi-spherical ball 13a formed on a distal end thereof and configured to be rotatably seated within the socket 24. The socket 24 can be integrally formed with the proximal end 12a of the elongate shaft, or it can be formed by coupling a hollow housing 12c, as shown, to the proximal end 12a of the elongate shaft 12. The hemi-spherical ball 13a can also be formed integrally with the handle 14, or it can be a separate member that is coupled to the handle 14. In order to movably mate the handle 14 to the shaft 12, the hemi-spherical ball 13a on the handle 14 can be retained within the socket 24 using the cables 34a-d, which attach to the handle 14 as will be discussed below. However, other mating techniques can be used to movably mate the handle 14 to the shaft 12. For example, the ball 13a can be spherical and it can be captured within a spherical socket formed in the proximal end 12a of the elongate shaft 12, or a mating element, such as a pin, can extend through the ball 13a to retain the ball 13a within the

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socket 24. While FIG. 4B illustrates a ball 13a formed on the handle 14 and a socket 24 formed in the shaft 12, the ball-and-socket connection can be reversed such that the ball is on the shaft 12 and the socket is in the handle 14. Moreover, a person skilled in the art will appreciate that a variety of other techniques can be used to movably couple the handle 14 to the proximal end 12a of the elongate shaft 12.

In use, the handle 14 can articulate or pivotally move relative to the shaft 12 to cause the end effector 16 to mimic the movement of the handle 14. This can be achieved by coupling the proximal end of the cables 34a-d to the handle 14. The connecting location of the cables 34a-d with the handle 14 can vary depending on the desired movement. In the illustrated embodiment, the cables (only three cables 34a, 34b and 34c are shown in FIG. 4A) extend from the elongate shaft 12, through the hollow housing 12c, and out of slots or openings formed in a proximal end of the hollow housing 12c. The cables 34a-d then extend around the ball 13a on the handle 14 and connect to a distal-facing surface on the handle 14 that surrounds the ball 13a. Virtually any technique known in the art can be used to connect the cables 34a-d to the handle 14 including, for example, mechanical mating techniques such as adhesives, an interference fit, threads, etc. As shown in FIG. 4A, the handle 14 includes openings formed therein, and the proximal ends (not shown) of the cables 34a-d can have a ball or other element formed thereon and configured to be captured within the openings. As further shown in FIG. 4A, the cables (only three cables 34a, 34b and 34c are shown) can remain spaced circumferentially around the handle 14. This will allow movement of the handle 14 to be mirrored by the end effector 16, as will be discussed in more detail below. Alternatively, the cables 34a-d can be crossed before they connect to the handle 14 to cause the end effector 16 to move in the same direction as the handle 14. For example, opposed cables 34a and 34c can cross one another and can connect to opposed sides of the handle 14, and opposed cables 34b and 34d can likewise cross one another and can connect to opposed sides of the handle 14. The cables 34a-d can be crossed at any location, such as within the hollow housing 12c on the proximal end 12a of the shaft 12.

As further shown in FIGS. 4A and 4B, the handle 14 can also include other features to facilitate use of the device. For example, the handle 14 can include a translating member 38 that is effective to close the jaws 18, 20 on the end effector 16, and a rotating member 40 that is effective to selectively rotate and actuate the end effector 16. The translating and rotating members 38, 40 are described in more detail in U.S. patent application Ser. No. 11/277,320, entitled "Surgical Fastener And Cutter With Single Cable Actuator" by Mark Ortiz et al. and filed on Mar. 23, 2006, now U.S. Pat. No. 7,575,144, which is hereby incorporated by reference in its entirety. In other embodiments, the handle 14 can include triggers, knobs, etc. for rotating and/or actuating the end effector 16.

Referring back to FIG. 1B, in use the handle 14 can be pivoted or angularly oriented relative to the proximal end 12a of the elongate shaft 12 to effect mimicking movement of the end effector 16. In particular, pivoting the handle 14 about the elongate shaft 12 in a first direction will apply a force to one or more of cables 34a-d to pull the cable(s) axially. As a result, the actuated cables will apply tension to the flexible neck 26 to cause the neck 26 to flex. In order to prevent the elongate shaft 12 from flexing in response to tension applied to the cables 34a-d by the handle 14, the flexible neck 26 can have a greater flexibility than the elongate shaft 12. This can be achieved, for example, using the alternating slits 32 as previously described, or in other embodiments the material can

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differ, or the elongate shaft can include a stabilizing element, such as a rod extending therethrough to render the shaft more rigid than the flexible neck.

The direction of movement of the handle 14 will be mimicked by the end effector 16, either in the same direction (i.e., corresponding movement) or in an opposite direction (i.e., mirrored movement), thus allowing a user to precisely control the position of the end effector 16. In an exemplary embodiment, the particular amount of movement of the end effector 16 can be proportional to the amount of movement of the handle 14. That is, the amount of movement of the end effector 16 can be directly equivalent to the amount of movement of the handle 14, or it can be proportionally increased or decreased relative to the amount of movement of the handle 14. In certain embodiments, it may be desirable to have the amount of movement of the end effector 16 be increased relative to the amount of movement of the handle 14. As a result, only small movements of the handle 14 will be necessary to allow large movements of the end effector 16. While various techniques can be achieved to proportionally multiple or increase the movement of the end effector 16, one exemplary embodiment of a force multiplying mechanism is an eccentric cam that is coupled to the cables and that increases the mechanical advantage, either force or displacement, of the cables 34a-d as tension is applied to the cables 34a-d by the handle 14.

A person skilled in the art will appreciate that, while the movement between the handle and the working end of the device can be proportional in theory, in practice some loss of force will likely occur as the force is transferred through the elongate shaft. Accordingly, proportional movement as used herein is intended to include applications in which the handle and working end are configured to move in proportionate amounts, but in which some loss of force may occur during actual operation of the device.

The various devices disclosed herein can also include a variety of other features to facilitate use thereof. For example, the device 10 of FIG. 1A can include an optical image gathering unit disposed on a distal end of the elongate shaft 12 and configured to acquire images during endoscopic procedures. While the location of the unit can vary, in one embodiment the optical image gathering unit can be disposed on the second coupler 30. In particular, FIG. 5 illustrates a ramp-shaped housing 42 that protrudes from an outer surface of the coupler 30, and that contains the optical image gathering unit therein. A viewing window 44 is formed on a distal-facing surface of the housing 42 to allow the unit to acquire images of the end effector 16 and surrounding surgical site. The images from the optical image gathering unit can be transferred to an external image display screen, or alternatively the device 10 can include image display screen disposed on or coupled to a proximal portion of the device. FIG. 6 illustrates one embodiment of an image display screen 46 protruding outward from the handle 14.

As previously indicated, the various techniques disclosed herein for controlling movement of a working end of an endoscopic surgical device can be used in conjunction with a variety of medical devices. FIG. 7 illustrates another embodiment of a medical device having an actuator for controlling movement of the working end thereof. In this embodiment, the medical device is in the form of an accessory channel 100 for use with an endoscope. An accessory channel 100 is an external device that can mate to and slide along an endoscope to allow other tools, such as grasper, cutters, etc., to be introduced therethrough and positioned in proximity to the viewing end of the endoscope. While the accessory channel 100 can have virtually any configuration, shape, and size, in the

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embodiment illustrated in FIG. 7 the accessory channel 100 includes an elongate tube or shaft 102 having an inner lumen extending between proximal and distal ends 102a, 102b thereof for receiving a tool therethrough. The accessory channel 100 can also include a mating element formed thereon for mating the accessory channel 100 directly to an endoscope or to a sleeve or other device disposed around an endoscope. While virtually any mating technique can be used, in the illustrated embodiment the mating element on the accessory channel 100 is in the form of a rail 104 that extends along a length of the elongate shaft 102. The rail 104 is configured to be received in a complementary track formed on an endoscope or a device disposed around an endoscope, such as a sleeve. A person skilled in the art will appreciate that a variety of other techniques can be used to mate the accessory channel either directly or indirectly to an endoscope.

In order to control movement of a working end of the accessory channel 100, the device 100 can include features similar to those previously described. In particular, the device 100 can a flexible neck 108 formed on or coupled to the distal end 102b of the elongate shaft 102, a handle 106 formed on or coupled to the proximal end 102a of the elongate shaft 102, and an actuator extending between the handle 106 and the flexible neck 108. In this embodiment, the actuator is configured to transfer forces from the handle 106 to the flexible neck 108 such that movement of the handle 106 is mimicked by the flexible neck 108, thus allowing a tool extending through the accessory channel 100 to be positioned at a desired angular orientation.

The flexible neck 108 can have a variety of configurations, and it can be a separate member that is coupled to the elongate shaft 102, or it can be formed integrally with the elongate shaft 102, as shown in FIG. 7. The neck 108 can be made flexible using various techniques. For example, the neck 108 can be formed from one or more segments that move relative to one another, and/or it can be formed from a flexible material. In the exemplary embodiment shown in FIG. 8A, the neck 108 includes several slits 112 formed therein and configured to provide maximum flexibility of the neck 108. While the size, quantity, and orientation of the slits 112 can vary to obtain the desired results, in the illustrated embodiment the flexible neck 108 includes four columns of slits (only three columns of slits, indicated by arrows 112a, 112b, 112c, are shown). Each column extends axially along a length of the flexible neck 108, and each column includes four rows of slits spaced radially around circumference of the neck 108. Each column of slits 112 is also axially offset from one another to allow the slits 112 to overlap. In use, when tension is applied to the actuator, the slits 112 will allow the neck 108 to bend or assume a curved configuration such that the neck 108 articulates relative to the remainder of the elongate shaft 102, as shown in FIGS. 8B and 8C.

In other embodiments, the slits can be positioned to allow flexion of the neck at multiple locations or bend points, or to otherwise allow the neck to flex into a predetermined position. By way of non-limiting example, FIG. 9A illustrates another embodiment of a flexible neck 108' having two regions of slits 112' formed therein. In particular, the flexible neck 108' includes a distal region of slits 112a' and a proximal region of slits 112b'. Each region 112a', 112b' can include any number of slits positioned at any location to provide a desired degree of flexibility in one or more desired directions. As shown in FIG. 9A, the proximal end distal regions of slits 112a', 112b' each include two rows of slits formed on opposed sides of and extending along the length of the flexible neck 108'. In use, when tension is applied to the flexible neck 108', as will be discussed in more detail below, the neck 108' will

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flex at both the proximal and distal regions 112a', 112b' and thereby articulate relative to the remainder of the elongate shaft 102'. As shown in FIG. 9B, flexion can occur first in the distal region 112a' of the neck 108'. Further tension applied to the neck 108' can then cause the proximal region 112b' to flex, as shown in FIG. 9C. In other embodiments, the slits positioning and/or size of the slits can be configured to cause flexion to occur in the proximal region 112b' before it occurs in the distal region 112a', or alternatively the slits can be configured to cause simultaneous flexion of the proximal and distal regions 112b', 112a'. A person skilled in the art will appreciate that the quantity, position, size, and shape of the slits can be adjusted to obtain the desired results. The particular configuration of the cut used to form each slit can also vary. For example, the width and length of the slit can remain constant from an outer surface of the elongate shaft to an inner surface of the elongate shaft, or alternatively the width and length can increase or decrease such that the slit tapers or otherwise varies. By way of non-limiting example, a tapering configuration can be formed by forming a slit having triangular configuration, where the length and width of the slit decrease from the outer surface to the inner surface of the elongate shaft.

As indicated above, the actuator is configured to apply tension to the flexible neck 108 to cause the neck 108 to articulate. The actuator can have a variety of configurations, but in one exemplary embodiment the actuator is similar to the aforementioned actuator and includes one or more cables that extend between the handle 106 and the distal end of the flexible neck 108 such that the handle 106 and the flexible neck 108 are operatively associated. Each cable can be configured to apply tension to the flexible neck 108 to cause the neck 108 to articulate in a plane of motion. Thus, where the device 100 includes only one cable, the flexible neck 108 can articulate in a single plane of motion. Each additional cable can allow the neck 108 to articulate in a different plane of motion. Where multiple cables are provided, the neck 108 can articulate in multiple planes of motion. Moreover, the cables can be simultaneously tensioned, potentially allow for 360° articulation of the flexible neck 108.

While the number of cables can vary, and the device 100 can include only one cable, in the embodiment shown in FIG. 7 the device 100 includes four cables (only three cables 110a, 110b, 110c are shown). A portion of the cables 110a, 110b, 110c, 110d is shown in more detail in FIG. 10. As noted above, the cables 110a-d extend along a length of the elongate shaft 102 between the handle 106 and the flexible neck 108. The particular location of the cables 110a-d can vary, but in an exemplary embodiment the cables 110a-d are spaced radially around a circumference of the elongate shaft 102 and they extend between the distal-most end of the flexible neck 108 and the handle 106. The cables 110a-d can extend internally through or externally along the elongate shaft 102, or they can extend through lumens or pathways formed in the sidewall of the elongate shaft 102. FIG. 11 illustrates a cross-sectional view of the elongate shaft 102, showing four lumens 103a, 103b, 103c, 103d formed therein. The lumens 103a-d preferably have a size that allows the cables 110a-d to slide therein, and they are spaced circumferentially about the elongate shaft 102. The lumens 103a-d extend between the proximal and distal ends 102a, 102b of the elongate shaft 102 to allow the cables 110a-d to extend between the handle 106 and the distal-most end of the flexible neck 108.

The distal end of the cables 110a-d can mate to the distal most end of the flexible neck 108 using a variety of techniques, but in one embodiment, shown in FIG. 12, the flexible neck 108 includes an end cap 114 coupled to or formed on the

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distal-most end thereof. While the configuration of the end cap **114** can vary depending on the configuration of the actuator, in the illustrated embodiment the end cap **114** includes four bores **114a**, **114b**, **114c**, **114d** formed therein and spaced around a circumference of the end cap **114** such that the bores **114a-d** align with the lumens **103a-d** in the elongate shaft **102**. Each bore **114a-d** is configured to receive one of the cables **110a-d**. Various mating techniques can be used to retain the cables **110a-d** within the bores **114a-d**. For example, FIG. **10** illustrates ball formed on the end of each cable **110a-d** for retaining the ends of the cables **110a-d** in the bores **114a-d** in the end cap **114**. The end cap **114** can also include a central lumen **116** formed therein for receiving a tool therethrough. The lumen **116** can also function to facilitate positioning of a tool inserted through the accessory channel **100**.

The proximal end of the cables **110a-d** can be mated to a handle **106** that is coupled to a proximal end of the shaft **102**. While the handle **106** can have a variety of configurations, in one exemplary embodiment, previously shown in FIG. **7**, the handle **106** can be in the form of a joystick that is movably coupled to the proximal end **102a** of the elongate shaft **102**, and in particular that is configured to articulate relative to the proximal end **102a** of the elongate shaft **102**. The articulating movement of the handle **106** can allow the motion of the handle **106** to be mimicked by the flexible neck **108**, as will be discussed below.

While articulating movement can be achieved using a variety of types of joints, in the illustrated embodiment a ball-and-socket connection is formed between the handle **106** and the elongate shaft **102**. In particular, as shown in more detail in FIGS. **13A** and **13B**, the proximal end **102a** of the elongate shaft **102** includes a housing **103** formed thereon and defining a socket **118** in a proximal end thereof. The handle **106** includes a ball **120** that is movably disposed within the socket **118**, and the joystick extends proximally from the ball **120** thus allowing the handle **106** to articulate relative to the elongate shaft **102**. A pin or other mechanism can be used to movably retain the ball **120** within the socket **118**. A person skilled in the art will appreciate that the handle can have a variety of other shapes, and that various other techniques can be used to movably connect the handle **106** to the elongate shaft **102**.

As indicated above, the proximal end of the cables **110a-d** is configured to mate to the handle **106**. Thus, the handle **106** can include features for mating to the cables **110a-d**. While the particular mating features can vary depending on the configuration of the actuator, in an exemplary embodiment the joystick **122** on the handle **106** includes four legs **124a**, **124b**, **124c**, **124d** formed thereon. The legs **124a-d** are spaced around a circumference of the joystick **122**, such that they are substantially aligned with the cables, and each leg **124a-d** is configured to mate to a terminal end of one of the cables **110a-d**. A ball-and-socket connection, as previously described with respect to the distal ends of the cables **110a-d**, can be used to mate the cables **110a-d** to the legs, or alternatively any other mating technique known in the art can be used.

Referring back to FIG. **7**, in use the handle **106** can be pivoted or angularly oriented relative to the proximal end **102a** of the elongate shaft **102** to effect mimicking movement of the flexible neck **108**, and to thereby position a tool extending through the flexible neck **108**. As shown in FIGS. **7** and **13B**, the joystick on the handle **106** can include a lumen **107** formed therethrough and axially aligned with the lumen **102c** in the elongate shaft **102** for allowing a tool to be introduced through the device **100**. In other embodiments, the handle **106**

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can be offset from the proximal end **102a** of the elongate shaft **102** such that the handle **106** is coupled to the cables, but does not interfere with direct access to the lumen **102c** in the elongate shaft **102**.

In order to control movement of the flexible neck **108** and thus a tool positioned therethrough, the handle **106** is pivoted or articulated about the proximal end **102a** of the elongate shaft **102**. For example, movement of the handle **106** in a first direction will cause the legs **124a-d** on the handle **106** to apply a force to one or more of cables **110a-d** to pull the cable(s) axially. As a result, the actuated cables will apply a tension force to the flexible neck **108** to cause the neck **108** to flex. In order to prevent the elongate shaft **102** from flexing in response to tension applied to the cables **110a-d** by the handle **106**, the flexible neck **108** can have a greater flexibility than the elongate shaft **102**. This can be achieved, for example, using the slits as previously described, or in other embodiments the shaft **102** can include a stabilizing element, such as a rod, extending therethrough to make the shaft **102** more rigid than the flexible neck **108**. The direction of movement of the handle **106** will be mimicked by the flexible neck **108**, either in the same direction (i.e., corresponding movement) or in an opposite direction (i.e., mirrored movement), thus allowing a user to precisely control the position of the flexible neck **108**, and thus to control the position of a tool extending through the flexible neck **108**. In an exemplary embodiment, the particular amount of movement of the flexible neck **108** can be proportional to the amount of movement of the handle **106**. That is, the amount of movement of the flexible neck **108** can be directly equivalent to the amount of movement of the handle **106**, or it can be proportionally increased or decreased relative to the amount of movement of the handle **106**. In certain embodiments, it may be desirable to have the amount of movement of the flexible neck **108** be increased relative to the amount of movement of the handle **106**. As a result, only small movements of the handle **106** will be necessary to allow large movements of the flexible neck **108**. While various techniques can be achieved to proportionally multiple or increase the movement of the flexible neck **108**, one exemplary embodiment of a force multiplying mechanism is an eccentric cam that is coupled to the cables and that increases the mechanical advantage, either force or displacement, of the cables **110a-d** as tension is applied to the cables **110a-d** by the handle **106**.

As previously explained, while the movement between the handle and the working end of the device can be proportional in theory, in practice some loss of force will likely occur as the force is transferred through the elongate shaft. Accordingly, proportional movement as used herein is intended to include applications in which the handle and working end are configured to move in proportionate amounts, but in which some loss of force may occur during actual operation of the device.

While FIGS. **1A** and **7** illustrate devices in which the working end mimics movement of the handle, the handle can have a variety of other configurations in which it is effective to articulate the working end of the device without having the working end of the device mimic movement of the handle. FIGS. **14A** and **14B** illustrate another embodiment of a device **200** having a handle **204** that includes a rotatable member that is effective to articulate a flexible neck **206** in one or more planes of motion relative to an elongate shaft **202** of the device. In general, the elongate shaft **202** of the device **200** is very similar to the elongate shaft **102** previously described, and it generally includes a flexible neck **206** coupled to or formed on a distal end thereof. Four cable actuators (not shown) extend through the elongate shaft between the handle **106** and the flexible neck **206**. The shaft **102** and the cable

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actuators are similar to the shaft 102 and cable actuators 110a-d previously described with respect to device 100, and thus they will not be described in detail.

The handle 204 of the device 200 is shown in more detail in FIGS. 15A and 15B. In general, the handle 204 includes one or more spools rotatably disposed therein. Each spool is configured to mate to and control one of the cable actuators. Thus, rotation of each spool will wind up or release the cable, thereby causing the flexible neck 108 to flex and articulate in a particular direction. While the number of spools can vary depending on the number of cable actuators, in the embodiment shown in FIGS. 15A and 15B, the handle 204 includes four spools 208a, 208b, 210a, 210b. The first two spools 208a, 208b are coupled to one another, and the second two spools 210a, 210b are coupled to one another. A first cable 212a is coupled to and wound around the first spool 208a, and a second cable 212b is coupled to and wound around the second spool 208b. The first and second cables 212a, 212b are positioned on and extend along opposite sides of the elongate shaft 202. As a result, tension applied to the first cable 212a will cause the flexible neck 206 to articulate in direction within a first plane of motion, and tension applied to the second cable 212b will cause the flexible neck 206 to articulate in the opposite direction within the same plane of motion. To allow tension to be applied to only one of the cables 212a, 212b, the first and second cables 212a, 212b are wound around the first and second spools 208a, 208b in opposite directions. Thus, rotation of the first and second spools 208a, 208b will wind and apply tension to one of the cables 212a, 212b while unwinding and releasing tension on the other one of the cables 212a, 212b. Third and fourth cables 212c, 212d are likewise wound around the third and fourth spools 210a, 210b such that rotation of the third and fourth and second spools 210a, 210b will wind and apply tension to one of the cables 212c, 212d while unwinding and releasing tension on the other one of the cables 212c, 212d. The third and fourth cables 212c, 212d can extend along the shaft 102 at a position that is radially offset from the first and second cables 212a, 212b such that the third and fourth cables 212c, 212d cause articulation of the flexible neck 206 in a second, different plane of motion. For example, the third and fourth cables 212c, 212d can be offset from the first and second cables 212a, 212b by about 90° such that the cables 212a-d are all spaced substantially equidistant around the circumference of the elongate shaft 202. A person skilled in the art will appreciate that the handle 204 can include any number of spools and cables to effect articulation in a desired number of planes.

In order to control the spools 208a, 208b, 210a, 210b, the device can include one or more grasping members. As shown in FIGS. 15A and 15B, a first rotatable knob 214 is coupled to the first and second spools 208a, 208b, and a second rotatable knob 216 is coupled to the third and fourth spools 210a, 210b. The knobs 214, 216 can be integrally formed with the spools 208a, 208b, 210a, 210b, or they can be coupled to the spools 208a, 208b, 210a, 210b by a shaft that extends through the spools 208a, 208b, 210a, 210b. In the illustrated embodiment, the first knob 214 is formed on or coupled directly to the first spool 208a, and the second knob 216 is coupled to the third and fourth spools 210a, 210b by a shaft 218 that extends from the knob 216 through the first and second spools 208a, 208b, and that couples to the third and fourth spools 210a, 210b. In other words, the first and second spools 208a, 208b are rotatably disposed around the shaft 218.

In certain exemplary embodiments, the spools and the rotatable knobs can also differ in size. In the embodiment shown in FIGS. 15A and 15B, the first and second spools 208a, 208b, as well as the first rotatable knob 214, have a

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diameter that is greater than a diameter of the third and fourth spools 210a, 210b and the second rotatable knob 216. While not necessary, such a configuration can be advantageous as it spaces the cables 212a-d apart to prevent the cables 212a-d from coming into contact with one another.

In use, a tool can be positioned through the elongate shaft 202, and the knobs 214, 216 can be rotated to articulate the flexible neck 206 on the shaft 202 and thereby position the tool as desired. As shown in FIGS. 14A and 14B, the handle 204 can include a lumen 205 extending therethrough and in alignment with the lumen in the elongate shaft 202 for allowing a tool to be passed through the handle 204 and the shaft 202. In other embodiments, the handle 204 can be offset from the elongate shaft 202 to provide direct access to the lumen in the elongate shaft 202. Once the tool is positioned through the shaft 202, the knobs 214, 216 can be rotated to articulate the flexible neck 206 on the distal end of the elongate shaft 202. In particular, the first knob 214 can be rotated in a first direction, e.g., clockwise, to apply tension to one of the cables, e.g., the first cable 212a, while releasing or unwinding the other cable, e.g., the second cable 212b. As a result, the tension applied to the first cable 212a will pull the distal-most end of the flexible neck 206 in a proximal direction, causing the flexible neck 206 to flex and thereby articulate in a first direction. Rotation of the first knob 214 in an opposite direction, e.g., counterclockwise, will unwind the first cable 212a while winding the second cable 212b. The flexible neck 206 will return to its initial, linear configuration. Further rotation of the first knob 214 will continue to wind the second cable 212b while unwinding the first cable 212a, thereby causing the flexible neck 206 to flex and articulate in an opposite direction along the same plane of motion. The second knob 216 can be likewise rotated to articulate the flexible in a different plane of motion. The knobs 214, 216 can also optionally be rotated simultaneously to articulate the flexible neck 206 in additional planes of motion different than the first and second planes of motion.

In other embodiments, the various devices disclosed herein can include a locking mechanism for locking the handle(s) and/or actuator in a fixed position to maintain the working end of a device in desired articulated or angular orientation. While the locking mechanism can have a variety of configurations, in one exemplary embodiment the locking mechanism can be in the form of a clamp that is effective to clamp down onto the cables and thereby prevent movement of the cables to lock the working end in a desired orientation. The clamp can have a variety of shapes and sizes, and it can be positioned at various locations on the device. FIGS. 16A and 16B illustrate one exemplary embodiment of a clamp 300 that is disposed around the hollow housing 12c on the surgical fastening and cutting device 10 of FIGS. 1A and 1B. The clamp 300 is generally ring-shaped and can be configured to be slidably or rotatably mated to the hollow housing 12c adjacent to the openings through which the cables (only three cables 34a, 34b, 34c are shown in FIG. 16B) extend. In an initial position, the clamp 300 is spaced apart from the openings to allow free movement of the cables 34a-d therethrough. Once the working end of the device, e.g., the end effector 16, is articulated into a desired position, the clamp 300 can be moved axially along the hollow housing 12c until it extends over the openings and engages the cables 34a-d extending therefrom. The clamp 300 will thus prevent movement of the cables 34a-d when the clamp 300 is in the locked position. In order to move the clamp 300 axially and to lock the clamp 300 to the housing 12c, the clamp 300 can include a mating element formed thereon and configured to engage a corresponding mating element formed on the housing 12c. As shown in FIGS. 16A

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and 16B, the clamp includes threads 302 formed therein that are configured to mate with corresponding threads (not shown) formed on the housing 12c. As a result, rotation of the clamp 300 about the housing 12c will cause the clamp 300 to move between the initial and locked positions. A person skilled in the art will appreciate that various other mating techniques can be used. Moreover, the locking mechanism can have a variety of other configurations. For example, the handle can include a locking element formed thereon and configured to lock the handle in a fixed, articulated position.

In other embodiments, the cables can be used to passively allow articulation of the elongate shaft through a body lumen, and the clamp 300 or other locking mechanism can be used to lock the working end of the device into position when desired. In such a configuration, the handle can merely be used to facilitate grasping of the device.

In other embodiments, the cable actuators disclosed herein used to effect articulation of a working end of a device can be formed from an electroactive polymer material. Electroactive polymers (EAPs), also referred to as artificial muscles, are materials that exhibit piezoelectric, pyroelectric, or electrostrictive properties in response to electrical or mechanical fields. In particular, EAPs are a set of conductive doped polymers that change shape when an electrical voltage is applied. The conductive polymer can be paired to some form of ionic fluid or gel and electrodes, and the flow of ions from the fluid/gel into or out of the conductive polymer can induce a shape change of the polymer. Typically, a voltage potential in the range of about 1V to 4 kV can be applied depending on the particular polymer and ionic fluid or gel used. It is important to note that EAPs do not change volume when energized, rather they merely expand in one direction and contract in a transverse direction. Thus, the cable actuators previously disclosed herein can be replaced by EAP actuators, and the handle can be configured to activate an energy source to selectively deliver energy to one or more of the cables. In an exemplary embodiment, movement of the handle can be configured to dictate the amount of the energy source, as well as the cable(s) receiving the energy source. As a result, movement of the handle can still be mimicked by the working end of the device to provide the user with the same, precise control over the position of the working end. The energy source can be an internal source, such as a battery, or it can be an external source. In other embodiments, the EAP cable actuators can supplement the axial force applied to the cables by movement of the handle and thereby proportionally increase the amount of movement of the working end relative to the handle.

In other aspects, the cable actuators can be formed from a shape-memory material, such as Nitinol. Such a configuration allows tension to be applied to the cables to articulate the end effector, yet allows the cables to return to an initial linear configuration without having to manipulate the handle.

In yet another embodiment, the various devices disclosed herein, including portions thereof, can be designed to be disposed of after a single use, or they can be designed to be used multiple times. In either case, the device can be reconditioned for reuse after at least one use. Reconditioning can include any combination of the steps of disassembly of the device, followed by cleaning or replacement of particular pieces, and subsequent reassembly. By way of example, the surgical stapling and fastening device shown in FIGS. 1A and 1B can be reconditioned after the device has been used in a medical procedure. The device can be disassembled, and any number of the particular pieces can be selectively replaced or removed in any combination. For example, for the surgical

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replaced by adding a new fastener cartridge to the end effector. Upon cleaning and/or replacement of particular parts, the device can be reassembled for subsequent use either at a reconditioning facility, or by a surgical team immediately prior to a surgical procedure. Those skilled in the art will appreciate that reconditioning of a device can utilize a variety of techniques for disassembly, cleaning/replacement, and reassembly. Use of such techniques, and the resulting reconditioned device, are all within the scope of the present application.

One skilled in the art will appreciate further features and advantages of the invention based on the above-described embodiments. Accordingly, the invention is not to be limited by what has been particularly shown and described, except as indicated by the appended claims. All publications and references cited herein are expressly incorporated herein by reference in their entirety.

Over the years a variety of minimally invasive robotic (or "telesurgical") systems have been developed to increase surgical dexterity as well as to permit a surgeon to operate on a patient in an intuitive manner. Many of such systems are disclosed in the following U.S. patents which are each herein incorporated by reference in their respective entirety: U.S. Pat. No. 5,792,135, entitled "Articulated Surgical Instrument For Performing Minimally Invasive Surgery With Enhanced Dexterity and Sensitivity", U.S. Pat. No. 6,231,565, entitled "Robotic Arm DLUS For Performing Surgical Tasks", U.S. Pat. No. 6,783,524, entitled "Robotic Surgical Tool With Ultrasound Cauterizing and Cutting Instrument", U.S. Pat. No. 6,364,888, entitled "Alignment of Master and Slave In a Minimally Invasive Surgical Apparatus", U.S. Pat. No. 7,524,320, entitled "Mechanical Actuator Interface System For Robotic Surgical Tools", U.S. Pat. No. 7,691,098, entitled "Platform Link Wrist Mechanism", U.S. Pat. No. 7,806,891, entitled "Repositioning and Reorientation of Master/Slave Relationship in Minimally Invasive Telesurgery", and U.S. Pat. No. 7,824,401, entitled "Surgical Tool With Writed Monopolar Electrosurgical End Effectors". Many of such systems, however, have in the past been unable to generate the magnitude of forces required to effectively cut and fasten tissue.

FIG. 17 depicts one version of a master controller 1001 that may be used in connection with a robotic arm slave cart 1100 of the type depicted in FIG. 18. Master controller 1001 and robotic arm slave cart 1100, as well as their respective components and control systems are collectively referred to herein as a robotic system 1000. Examples of such systems and devices are disclosed in U.S. Pat. No. 7,524,320 which has been herein incorporated by reference. Thus, various details of such devices will not be described in detail herein beyond that which may be necessary to understand various embodiments and forms of the present invention. As is known, the master controller 1001 generally includes master controllers (generally represented as 1003 in FIG. 17) which are grasped by the surgeon and manipulated in space while the surgeon views the procedure via a stereo display 1002. The master controllers 1001 generally comprise manual input devices which preferably move with multiple degrees of freedom, and which often further have an actuatable handle for actuating tools (for example, for closing grasping saws, applying an electrical potential to an electrode, or the like).

As can be seen in FIG. 18, in one form, the robotic arm cart 1100 is configured to actuate a plurality of surgical tools, generally designated as 1200. Various robotic surgery systems and methods employing master controller and robotic arm cart arrangements are disclosed in U.S. Pat. No. 6,132,368, entitled "Multi-Component Telepresence System and

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Method”, the full disclosure of which is incorporated herein by reference. In various forms, the robotic arm cart **1100** includes a base **1002** from which, in the illustrated embodiment, three surgical tools **1200** are supported. In various forms, the surgical tools **1200** are each supported by a series of manually articulatable linkages, generally referred to as set-up joints **1104**, and a robotic manipulator **1106**. These structures are herein illustrated with protective covers extending over much of the robotic linkage. These protective covers may be optional, and may be limited in size or entirely eliminated in some embodiments to minimize the inertia that is encountered by the servo mechanisms used to manipulate such devices, to limit the volume of moving components so as to avoid collisions, and to limit the overall weight of the cart **1100**. Cart **1100** will generally have dimensions suitable for transporting the cart **1100** between operating rooms. The cart **1100** may be configured to typically fit through standard operating room doors and onto standard hospital elevators. In various forms, the cart **1100** would preferably have a weight and include a wheel (or other transportation) system that allows the cart **1100** to be positioned adjacent an operating table by a single attendant.

Referring now to FIG. **19**, in at least one form, robotic manipulators **1106** may include a linkage **1108** that constrains movement of the surgical tool **1200**. In various embodiments, linkage **1108** includes rigid links coupled together by rotational joints in a parallelogram arrangement so that the surgical tool **1200** rotates around a point in space **1110**, as more fully described in issued U.S. Pat. No. 5,817,084, the full disclosure of which is herein incorporated by reference. The parallelogram arrangement constrains rotation to pivoting about an axis **1112a**, sometimes called the pitch axis. The links supporting the parallelogram linkage are pivotally mounted to set-up joints **1104** (FIG. **18**) so that the surgical tool **1200** further rotates about an axis **1112b**, sometimes called the yaw axis. The pitch and yaw axes **1112a**, **1112b** intersect at the remote center **1114**, which is aligned along a shaft **1208** of the surgical tool **1200**. The surgical tool **1200** may have further degrees of driven freedom as supported by manipulator **1106**, including sliding motion of the surgical tool **1200** along the longitudinal tool axis “LT-LT”. As the surgical tool **1200** slides along the tool axis LT-LT relative to manipulator **1106** (arrow **1112c**), remote center **1114** remains fixed relative to base **1116** of manipulator **1106**. Hence, the entire manipulator is generally moved to re-position remote center **1114**. Linkage **1108** of manipulator **1106** is driven by a series of motors **1120**. These motors actively move linkage **1108** in response to commands from a processor of a control system. As will be discussed in further detail below, motors **1120** are also employed to manipulate the surgical tool **1200**.

An alternative set-up joint structure is illustrated in FIG. **20**. In this embodiment, a surgical tool **1200** is supported by an alternative manipulator structure **1106'** between two tissue manipulation tools. Those of ordinary skill in the art will appreciate that various embodiments of the present invention may incorporate a wide variety of alternative robotic structures, including those described in U.S. Pat. No. 5,878,193, entitled “Automated Endoscope System For Optimal Positioning”, the full disclosure of which is incorporated herein by reference. Additionally, while the data communication between a robotic component and the processor of the robotic surgical system is primarily described herein with reference to communication between the surgical tool **1200** and the master controller **1001**, it should be understood that similar communication may take place between circuitry of a manipulator, a set-up joint, an endoscope or other image

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capture device, or the like, and the processor of the robotic surgical system for component compatibility verification, component-type identification, component calibration (such as off-set or the like) communication, confirmation of coupling of the component to the robotic surgical system, or the like.

An exemplary non-limiting surgical tool **1200** that is well-adapted for use with a robotic system **1000** that has a tool drive assembly **1010** (FIG. **22**) that is operatively coupled to a master controller **1001** that is operable by inputs from an operator (i.e., a surgeon) is depicted in FIG. **21**. As can be seen in that Figure, the surgical tool **1200** includes a surgical end effector **2012** that comprises an endocutter. In at least one form, the surgical tool **1200** generally includes an elongated shaft assembly **2008** that has a proximal closure tube **2040** and a distal closure tube **2042** that are coupled together by an articulation joint **2011**. The surgical tool **1200** is operably coupled to the manipulator by a tool mounting portion, generally designated as **1300**. The surgical tool **1200** further includes an interface **1230** which mechanically and electrically couples the tool mounting portion **1300** to the manipulator. One form of interface **1230** is illustrated in FIGS. **22-26**. In various embodiments, the tool mounting portion **1300** includes a tool mounting plate **1302** that operably supports a plurality of (four are shown in FIG. **26**) rotatable body portions, driven discs or elements **1304**, that each include a pair of pins **1306** that extend from a surface of the driven element **1304**. One pin **1306** is closer to an axis of rotation of each driven element **1304** than the other pin **1306** on the same driven element **1304**, which helps to ensure positive angular alignment of the driven element **1304**. Interface **1230** includes an adaptor portion **1240** that is configured to mountingly engage the mounting plate **1302** as will be further discussed below. The adaptor portion **1240** may include an array of electrical connecting pins **1242** (FIG. **24**) which may be coupled to a memory structure by a circuit board within the tool mounting portion **1300**. While interface **1230** is described herein with reference to mechanical, electrical, and magnetic coupling elements, it should be understood that a wide variety of telemetry modalities might be used, including infrared, inductive coupling, or the like.

As can be seen in FIGS. **22-25**, the adapter portion **1240** generally includes a tool side **1244** and a holder side **1246**. In various forms, a plurality of rotatable bodies **1250** are mounted to a floating plate **1248** which has a limited range of movement relative to the surrounding adaptor structure normal to the major surfaces of the adaptor **1240**. Axial movement of the floating plate **1248** helps decouple the rotatable bodies **1250** from the tool mounting portion **1300** when the levers **1303** along the sides of the tool mounting portion housing **1301** are actuated (See FIG. **21**). Other mechanisms/arrangements may be employed for releasably coupling the tool mounting portion **1300** to the adaptor **1240**. In at least one form, rotatable bodies **1250** are resiliently mounted to floating plate **1248** by resilient radial members which extend into a circumferential indentation about the rotatable bodies **1250**. The rotatable bodies **1250** can move axially relative to plate **1248** by deflection of these resilient structures. When disposed in a first axial position (toward tool side **1244**) the rotatable bodies **1250** are free to rotate without angular limitation. However, as the rotatable bodies **1250** move axially toward tool side **1244**, tabs **1252** (extending radially from the rotatable bodies **1250**) laterally engage detents on the floating plates so as to limit angular rotation of the rotatable bodies **1250** about their axes. This limited rotation can be used to help drivingly engage the rotatable bodies **1250** with drive pins **1272** of a corresponding tool holder portion **1270** of the

robotic system **1000**, as the drive pins **1272** will push the rotatable bodies **1250** into the limited rotation position until the pins **1234** are aligned with (and slide into) openings **1256'**. Openings **1256** on the tool side **1244** and openings **1256'** on the holder side **1246** of rotatable bodies **1250** are configured to accurately align the driven elements **1304** (FIG. **26**) of the tool mounting portion **1300** with the drive elements **1271** of the tool holder **1270**. As described above regarding inner and outer pins **1306** of driven elements **1304**, the openings **1256**, **1256'** are at differing distances from the axis of rotation on their respective rotatable bodies **1250** so as to ensure that the alignment is not 180 degrees from its intended position. Additionally, each of the openings **1256** is slightly radially elongated so as to fittingly receive the pins **1306** in the circumferential orientation. This allows the pins **1306** to slide radially within the openings **1256**, **1256'** and accommodate some axial misalignment between the tool **1200** and tool holder **1270**, while minimizing any angular misalignment and backlash between the drive and driven elements. Openings **1256** on the tool side **1244** are offset by about 90 degrees from the openings **1256'** (shown in broken lines) on the holder side **1246**, as can be seen most clearly in FIG. **25**.

Various embodiments may further include an array of electrical connector pins **1242** located on holder side **1246** of adaptor **1240**, and the tool side **1244** of the adaptor **1240** may include slots **1258** (FIG. **25**) for receiving a pin array (not shown) from the tool mounting portion **1300**. In addition to transmitting electrical signals between the surgical tool **1200** and the tool holder **1270**, at least some of these electrical connections may be coupled to an adaptor memory device **1260** (FIG. **24**) by a circuit board of the adaptor **1240**.

A detachable latch arrangement **1239** may be employed to releasably affix the adaptor **1240** to the tool holder **1270**. As used herein, the term "tool drive assembly" when used in the context of the robotic system **1000**, at least encompasses various embodiments of the adapter **1240** and tool holder **1270** and which has been generally designated as **1010** in FIG. **22**. For example, as can be seen in FIG. **22**, the tool holder **1270** may include a first latch pin arrangement **1274** that is sized to be received in corresponding clevis slots **1241** provided in the adaptor **1240**. In addition, the tool holder **1270** may further have second latch pins **1276** that are sized to be retained in corresponding latch clevises **1243** in the adaptor **1240**. See FIG. **24**. In at least one form, a latch assembly **1245** is movably supported on the adaptor **1240** and is biasable between a first latched position wherein the latch pins **1276** are retained within their respective latch clevis **1243** and an unlatched position wherein the second latch pins **1276** may be into or removed from the latch clevises **1243**. A spring or springs (not shown) are employed to bias the latch assembly into the latched position. A lip on the tool side **1244** of adaptor **1240** may slidably receive laterally extending tabs of tool mounting housing **1301**.

Turning next to FIGS. **26-33**, in at least one embodiment, the surgical tool **1200** includes a surgical end effector **2012** that comprises in this example, among other things, at least one component **2024** that is selectively movable between first and second positions relative to at least one other component **2022** in response to various control motions applied thereto as will be discussed in further detail below. In various embodiments, component **2022** comprises an elongated channel **2022** configured to operably support a surgical staple cartridge **2034** therein and component **2024** comprises a pivotally translatable clamping member, such as an anvil **2024**. Various embodiments of the surgical end effector **2012** are configured to maintain the anvil **2024** and elongated channel **2022** at a spacing that assures effective stapling and severing

of tissue clamped in the surgical end effector **2012**. As can be seen in FIG. **37**, the surgical end effector **2012** further includes a cutting instrument **2032** and a sled **2033**. The cutting instrument **2032** may be, for example, a knife. The surgical staple cartridge **2034** operably houses a plurality of surgical staples (not shown) therein that are supported on movable staple drivers (not shown). As the cutting instrument **2032** is driven distally through a centrally-disposed slot (not shown) in the surgical staple cartridge **2034**, it forces the sled **2033** distally as well. As the sled **2033** is driven distally, its "wedge-shaped" configuration contacts the movable staple drivers and drives them vertically toward the closed anvil **2024**. The surgical staples are formed as they are driven into the forming surface located on the underside of the anvil **2024**. The sled **2033** may be part of the surgical staple cartridge **2034**, such that when the cutting instrument **2032** is retracted following the cutting operation, the sled **2033** does not retract. The anvil **2024** may be pivotally opened and closed at a pivot point **2025** located at the proximal end of the elongated channel **2022**. The anvil **2024** may also include a tab **2027** at its proximal end that interacts with a component of the mechanical closure system (described further below) to facilitate the opening of the anvil **2024**. The elongated channel **2022** and the anvil **2024** may be made of an electrically conductive material (such as metal) so that they may serve as part of an antenna that communicates with sensor(s) in the end effector, as described above. The surgical staple cartridge **2034** could be made of a nonconductive material (such as plastic) and the sensor may be connected to or disposed in the surgical staple cartridge **2034**, as was also described above.

As can be seen in FIGS. **26-33**, the surgical end effector **2012** is attached to the tool mounting portion **1300** by an elongated shaft assembly **2008** according to various embodiments. As shown in the illustrated embodiment, the shaft assembly **2008** includes an articulation joint generally indicated as **2011** that enables the surgical end effector **2012** to be selectively articulated about an articulation axis AA-AA that is substantially transverse to a longitudinal tool axis LT-LT. See FIG. **27**. In other embodiments, the articulation joint is omitted. In various embodiments, the shaft assembly **2008** may include a closure tube assembly **2009** that comprises a proximal closure tube **2040** and a distal closure tube **2042** that are pivotally linked by a pivot links **2044** and operably supported on a spine assembly generally depicted as **2049**. In the illustrated embodiment, the spine assembly **2049** comprises a distal spine portion **2050** that is attached to the elongated channel **2022** and is pivotally coupled to the proximal spine portion **2052**. The closure tube assembly **2009** is configured to axially slide on the spine assembly **2049** in response to actuation motions applied thereto. The distal closure tube **2042** includes an opening **2045** into which the tab **2027** on the anvil **2024** is inserted in order to facilitate opening of the anvil **2024** as the distal closure tube **2042** is moved axially in the proximal direction "PD". The closure tubes **2040**, **2042** may be made of electrically conductive material (such as metal) so that they may serve as part of the antenna, as described above. Components of the main drive shaft assembly (e.g., the drive shafts **2048**, **2050**) may be made of a nonconductive material (such as plastic).

In use, it may be desirable to rotate the surgical end effector **2012** about the longitudinal tool axis LT-LT. In at least one embodiment, the tool mounting portion **1300** includes a rotational transmission assembly **2069** that is configured to receive a corresponding rotary output motion from the tool drive assembly **1010** of the robotic system **1000** and convert that rotary output motion to a rotary control motion for rotating the elongated shaft assembly **2008** (and surgical end

effector **2012**) about the longitudinal tool axis LT-LT. In various embodiments, for example, the proximal end **2060** of the proximal closure tube **2040** is rotatably supported on the tool mounting plate **1302** of the tool mounting portion **1300** by a forward support cradle **1309** and a closure sled **2100** that is also movably supported on the tool mounting plate **1302**. In at least one form, the rotational transmission assembly **2069** includes a tube gear segment **2062** that is formed on (or attached to) the proximal end **2060** of the proximal closure tube **2040** for operable engagement by a rotational gear assembly **2070** that is operably supported on the tool mounting plate **1302**. As can be seen in FIG. 29, the rotational gear assembly **2070**, in at least one embodiment, comprises a rotation drive gear **2072** that is coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **1302** when the tool mounting portion **1300** is coupled to the tool drive assembly **1010**. See FIG. 26. The rotational gear assembly **2070** further comprises a rotary driven gear **2074** that is rotatably supported on the tool mounting plate **1302** in meshing engagement with the tube gear segment **2062** and the rotation drive gear **2072**. Application of a first rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **2072**. Rotation of the rotation drive gear **2072** ultimately results in the rotation of the elongated shaft assembly **2008** (and the surgical end effector **2012**) about the longitudinal tool axis LT-LT (represented by arrow “R” in FIG. 29). It will be appreciated that the application of a rotary output motion from the tool drive assembly **1010** in one direction will result in the rotation of the elongated shaft assembly **2008** and surgical end effector **2012** about the longitudinal tool axis LT-LT in a first direction and an application of the rotary output motion in an opposite direction will result in the rotation of the elongated shaft assembly **2008** and surgical end effector **2012** in a second direction that is opposite to the first direction.

In at least one embodiment, the closure of the anvil **2024** relative to the staple cartridge **2034** is accomplished by axially moving the closure tube assembly **2009** in the distal direction “DD” on the spine assembly **2049**. As indicated above, in various embodiments, the proximal end **2060** of the proximal closure tube **2040** is supported by the closure sled **2100** which comprises a portion of a closure transmission, generally depicted as **2099**. In at least one form, the closure sled **2100** is configured to support the closure tube **2009** on the tool mounting plate **1320** such that the proximal closure tube **2040** can rotate relative to the closure sled **2100**, yet travel axially with the closure sled **2100**. In particular, as can be seen in FIG. 34, the closure sled **2100** has an upstanding tab **2101** that extends into a radial groove **2063** in the proximal end portion of the proximal closure tube **2040**. In addition, as can be seen in FIGS. 31 and 34, the closure sled **2100** has a tab portion **2102** that extends through a slot **1305** in the tool mounting plate **1302**. The tab portion **2102** is configured to retain the closure sled **2100** in sliding engagement with the tool mounting plate **1302**. In various embodiments, the closure sled **2100** has an upstanding portion **2104** that has a closure rack gear **2106** formed thereon. The closure rack gear **2106** is configured for driving engagement with a closure gear assembly **2110**. See FIG. 31.

In various forms, the closure gear assembly **2110** includes a closure spur gear **2112** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **1302**. See FIG. 26. Thus, application of a second rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corre-

sponding second driven element **1304** will cause rotation of the closure spur gear **2112** when the tool mounting portion **1300** is coupled to the tool drive assembly **1010**. The closure gear assembly **2110** further includes a closure reduction gear set **2114** that is supported in meshing engagement with the closure spur gear **2112**. As can be seen in FIGS. 30 and 31, the closure reduction gear set **2114** includes a driven gear **2116** that is rotatably supported in meshing engagement with the closure spur gear **2112**. The closure reduction gear set **2114** further includes a first closure drive gear **2118** that is in meshing engagement with a second closure drive gear **2120** that is rotatably supported on the tool mounting plate **1302** in meshing engagement with the closure rack gear **2106**. Thus, application of a second rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corresponding second driven element **1304** will cause rotation of the closure spur gear **2112** and the closure transmission **2110** and ultimately drive the closure sled **2100** and closure tube assembly **2009** axially. The axial direction in which the closure tube assembly **2009** moves ultimately depends upon the direction in which the second driven element **1304** is rotated. For example, in response to one rotary output motion received from the tool drive assembly **1010** of the robotic system **1000**, the closure sled **2100** will be driven in the distal direction “DD” and ultimately drive the closure tube assembly **1009** in the distal direction. As the distal closure tube **2042** is driven distally, the end of the closure tube segment **2042** will engage a portion of the anvil **2024** and cause the anvil **2024** to pivot to a closed position. Upon application of an “opening” out put motion from the tool drive assembly **1010** of the robotic system **1000**, the closure sled **2100** and shaft assembly **2008** will be driven in the proximal direction “PD”. As the distal closure tube **2042** is driven in the proximal direction, the opening **2045** therein interacts with the tab **2027** on the anvil **2024** to facilitate the opening thereof. In various embodiments, a spring (not shown) may be employed to bias the anvil to the open position when the distal closure tube **2042** has been moved to its starting position. In various embodiments, the various gears of the closure gear assembly **2110** are sized to generate the necessary closure forces needed to satisfactorily close the anvil **2024** onto the tissue to be cut and stapled by the surgical end effector **2012**. For example, the gears of the closure transmission **2110** may be sized to generate approximately 70-120 pounds.

In various embodiments, the cutting instrument **2032** is driven through the surgical end effector **2012** by a knife bar **2200**. See FIGS. 32 and 34. In at least one form, the knife bar **2200** may be fabricated from, for example, stainless steel or other similar material and has a substantially rectangular cross-sectional shape. Such knife bar configuration is sufficiently rigid to push the cutting instrument **2032** through tissue clamped in the surgical end effector **2012**, while still being flexible enough to enable the surgical end effector **2012** to articulate relative to the proximal closure tube **2040** and the proximal spine portion **2052** about the articulation axis AA-AA as will be discussed in further detail below. As can be seen in FIGS. 35 and 36, the proximal spine portion **2052** has a rectangular-shaped passage **2054** extending therethrough to provide support to the knife bar **2200** as it is axially pushed therethrough. The proximal spine portion **2052** has a proximal end **2056** that is rotatably mounted to a spine mounting bracket **2057** attached to the tool mounting plate **1032**. See FIG. 34. Such arrangement permits the proximal spine portion **2052** to rotate, but not move axially, within the proximal closure tube **2040**.

As shown in FIG. 32, the distal end **2202** of the knife bar **2200** is attached to the cutting instrument **2032**. The proximal

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end **2204** of the knife bar **2200** is rotatably affixed to a knife rack gear **2206** such that the knife bar **2200** is free to rotate relative to the knife rack gear **2206**. See FIG. **34**. As can be seen in FIGS. **28-33**, the knife rack gear **2206** is slidably supported within a rack housing **2210** that is attached to the tool mounting plate **1302** such that the knife rack gear **2206** is retained in meshing engagement with a knife gear assembly **2220**. More specifically and with reference to FIG. **31**, in at least one embodiment, the knife gear assembly **2220** includes a knife spur gear **2222** that is coupled to a corresponding third one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **1302**. See FIG. **26**. Thus, application of another rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding third driven element **1304** will cause rotation of the knife spur gear **2222**. The knife gear assembly **2220** further includes a knife gear reduction set **2224** that includes a first knife driven gear **2226** and a second knife drive gear **2228**. The knife gear reduction set **2224** is rotatably mounted to the tool mounting plate **1302** such that the first knife driven gear **2226** is in meshing engagement with the knife spur gear **2222**. Likewise, the second knife drive gear **2228** is in meshing engagement with a third knife drive gear **2230** that is rotatably supported on the tool mounting plate **1302** in meshing engagement with the knife rack gear **2206**. In various embodiments, the gears of the knife gear assembly **2220** are sized to generate the forces needed to drive the cutting element **2032** through the tissue clamped in the surgical end effector **2012** and actuate the staples therein. For example, the gears of the knife drive assembly **2230** may be sized to generate approximately 40 to 100 pounds. It will be appreciated that the application of a rotary output motion from the tool drive assembly **1010** in one direction will result in the axial movement of the cutting instrument **2032** in a distal direction and application of the rotary output motion in an opposite direction will result in the axial travel of the cutting instrument **2032** in a proximal direction.

In various embodiments, the surgical tool **1200** employs and articulation system **2007** that includes an articulation joint **2011** that enables the surgical end effector **2012** to be articulated about an articulation axis AA-AA that is substantially transverse to the longitudinal tool axis LT-LT. In at least one embodiment, the surgical tool **1200** includes first and second articulation bars **2250a**, **2250b** that are slidably supported within corresponding passages **2053** provided through the proximal spine portion **2052**. See FIGS. **39** and **41**. In at least one form, the first and second articulation bars **2250a**, **2250b** are actuated by an articulation transmission generally designated as **2249** that is operably supported on the tool mounting plate **1032**. Each of the articulation bars **2250a**, **2250b** has a proximal end **2252** that has a guide rod protruding therefrom which extend laterally through a corresponding slot in the proximal end portion of the proximal spine portion **2052** and into a corresponding arcuate slot in an articulation nut **2260** which comprises a portion of the articulation transmission. FIG. **35** illustrates articulation bar **2250a**. It will be understood that articulation bar **2250b** is similarly constructed. As can be seen in FIG. **35**, for example, the articulation bar **2250a** has a guide rod **2254** which extends laterally through a corresponding slot **2058** in the proximal end portion **2056** of the distal spine portion **2050** and into a corresponding arcuate slot **2262** in the articulation nut **2260**. In addition, the articulation bar **2250a** has a distal end **2251a** that is pivotally coupled to the distal spine portion **2050** by, for example, a pin **2253a** and articulation bar **2250b** has a distal end **2251b** that is pivotally coupled to the distal spine portion **2050** by, for example, a pin **2253b**. In particular, the articulation bar **2250a** is laterally offset in a first lateral direction from the longitudinal tool axis LT-LT and the articulation bar **2250b** is laterally offset in a second lateral direction from the longitudinal tool axis LT-LT. Thus, axial movement of the articulation bars **2250a** and **2250b** in opposing directions will result in the articulation of the distal spine portion **2050** as well as the surgical end effector **2012** attached thereto about the articulation axis AA-AA as will be discussed in further detail below.

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Articulation of the surgical end effector **2012** is controlled by rotating the articulation nut **2260** about the longitudinal tool axis LT-LT. The articulation nut **2260** is rotatably journaled on the proximal end portion **2056** of the distal spine portion **2050** and is rotatably driven thereon by an articulation gear assembly **2270**. More specifically and with reference to FIG. **29**, in at least one embodiment, the articulation gear assembly **2270** includes an articulation spur gear **2272** that is coupled to a corresponding fourth one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **1302**. See FIG. **26**. Thus, application of another rotary input motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding fourth driven element **1304** will cause rotation of the articulation spur gear **2272** when the interface **1230** is coupled to the tool holder **1270**. An articulation drive gear **2274** is rotatably supported on the tool mounting plate **1302** in meshing engagement with the articulation spur gear **2272** and a gear portion **2264** of the articulation nut **2260** as shown. As can be seen in FIGS. **34** and **35**, the articulation nut **2260** has a shoulder **2266** formed thereon that defines an annular groove **2267** for receiving retaining posts **2268** therein. Retaining posts **2268** are attached to the tool mounting plate **1302** and serve to prevent the articulation nut **2260** from moving axially on the proximal spine portion **2052** while maintaining the ability to be rotated relative thereto. Thus, rotation of the articulation nut **2260** in a first direction, will result in the axial movement of the articulation bar **2250a** in a distal direction "DD" and the axial movement of the articulation bar **2250b** in a proximal direction "PD" because of the interaction of the guide rods **2254** with the spiral slots **2262** in the articulation gear **2260**. Similarly, rotation of the articulation nut **2260** in a second direction that is opposite to the first direction will result in the axial movement of the articulation bar **2250a** in the proximal direction "PD" as well as cause articulation bar **2250b** to axially move in the distal direction "DD". Thus, the surgical end effector **2012** may be selectively articulated about articulation axis "AA-AA" in a first direction "FD" by simultaneously moving the articulation bar **2250a** in the distal direction "DD" and the articulation bar **2250b** in the proximal direction "PD". Likewise, the surgical end effector **2012** may be selectively articulated about the articulation axis "AA-AA" in a second direction "SD" by simultaneously moving the articulation bar **2250a** in the proximal direction "PD" and the articulation bar **2250b** in the distal direction "DD." See FIG. **27**.

The tool embodiment described above employs an interface arrangement that is particularly well-suited for mounting the robotically controllable medical tool onto at least one form of robotic arm arrangement that generates at least four different rotary control motions. Those of ordinary skill in the art will appreciate that such rotary output motions may be selectively controlled through the programmable control systems employed by the robotic system/controller. For example, the tool arrangement described above may be well-suited for use with those robotic systems manufactured by Intuitive Surgical, Inc. of Sunnyvale, Calif., U.S.A., many of which may be described in detail in various patents incorpo-

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rated herein by reference. The unique and novel aspects of various embodiments of the present invention serve to utilize the rotary output motions supplied by the robotic system to generate specific control motions having sufficient magnitudes that enable end effectors to cut and staple tissue. Thus, the unique arrangements and principles of various embodiments of the present invention may enable a variety of different forms of the tool systems disclosed and claimed herein to be effectively employed in connection with other types and forms of robotic systems that supply programmed rotary or other output motions. In addition, as will become further apparent as the present Detailed Description proceeds, various end effector embodiments of the present invention that require other forms of actuation motions may also be effectively actuated utilizing one or more of the control motions generated by the robotic system.

FIGS. 38-42 illustrate yet another surgical tool **2300** that may be effectively employed in connection with the robotic system **1000** that has a tool drive assembly that is operably coupled to a controller of the robotic system that is operable by inputs from an operator and which is configured to provide at least one rotary output motion to at least one rotatable body portion supported on the tool drive assembly. In various forms, the surgical tool **2300** includes a surgical end effector **2312** that includes an elongated channel **2322** and a pivotally translatable clamping member, such as an anvil **2324**, which are maintained at a spacing that assures effective stapling and severing of tissue clamped in the surgical end effector **2312**. As shown in the illustrated embodiment, the surgical end effector **2312** may include, in addition to the previously-mentioned elongated channel **2322** and anvil **2324**, a cutting instrument **2332** that has a sled portion **2333** formed thereon, a surgical staple cartridge **2334** that is seated in the elongated channel **2322**, and a rotary end effector drive shaft **2336** that has a helical screw thread formed thereon. The cutting instrument **2332** may be, for example, a knife. As will be discussed in further detail below, rotation of the end effector drive shaft **2336** will cause the cutting instrument **2332** and sled portion **2333** to axially travel through the surgical staple cartridge **2334** to move between a starting position and an ending position. The direction of axial travel of the cutting instrument **2332** depends upon the direction in which the end effector drive shaft **2336** is rotated. The anvil **2324** may be pivotably opened and closed at a pivot point **2325** connected to the proximate end of the elongated channel **2322**. The anvil **2324** may also include a tab **2327** at its proximate end that operably interfaces with a component of the mechanical closure system (described further below) to open and close the anvil **2324**. When the end effector drive shaft **2336** is rotated, the cutting instrument **2332** and sled **2333** will travel longitudinally through the surgical staple cartridge **2334** from the starting position to the ending position, thereby cutting tissue clamped within the surgical end effector **2312**. The movement of the sled **2333** through the surgical staple cartridge **2334** causes the staples therein to be driven through the severed tissue and against the closed anvil **2324**, which turns the staples to fasten the severed tissue. In one form, the elongated channel **2322** and the anvil **2324** may be made of an electrically conductive material (such as metal) so that they may serve as part of the antenna that communicates with sensor(s) in the end effector, as described above. The surgical staple cartridge **2334** could be made of a nonconductive material (such as plastic) and the sensor may be connected to or disposed in the surgical staple cartridge **2334**, as described above.

It should be noted that although the embodiments of the surgical tool **2300** described herein employ a surgical end

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effector **2312** that staples the severed tissue, in other embodiments different techniques for fastening or sealing the severed tissue may be used. For example, end effectors that use RF energy or adhesives to fasten the severed tissue may also be used. U.S. Pat. No. 5,709,680, entitled "Electrosurgical Hemostatic Device" to Yates et al., and U.S. Pat. No. 5,688,270, entitled "Electrosurgical Hemostatic Device With Recessed And/Or Offset Electrodes" to Yates et al., which are incorporated herein by reference, discloses cutting instruments that use RF energy to fasten the severed tissue. U.S. patent application Ser. No. 11/267,811 to Morgan et al., now U.S. Pat. No. 7,673,783 and U.S. patent application Ser. No. 11/267,383 to Shelton et al., now U.S. Pat. No. 7,607,557, which are also incorporated herein by reference, disclose cutting instruments that use adhesives to fasten the severed tissue. Accordingly, although the description herein refers to cutting/stapling operations and the like, it should be recognized that this is an exemplary embodiment and is not meant to be limiting. Other tissue-fastening techniques may also be used.

In the illustrated embodiment, the surgical end effector **2312** is coupled to an elongated shaft assembly **2308** that is coupled to a tool mounting portion **2460** and defines a longitudinal tool axis LT-LT. In this embodiment, the elongated shaft assembly **2308** does not include an articulation joint. Those of ordinary skill in the art will understand that other embodiments may have an articulation joint therein. In at least one embodiment, the elongated shaft assembly **2308** comprises a hollow outer tube **2340** that is rotatably supported on a tool mounting plate **2462** of a tool mounting portion **2460** as will be discussed in further detail below. In various embodiments, the elongated shaft assembly **2308** further includes a distal spine shaft **2350**. Distal spine shaft **2350** has a distal end portion **2354** that is coupled to, or otherwise integrally formed with, a distal stationary base portion **2360** that is non-movably coupled to the channel **2322**. See FIGS. 39-41.

As shown in FIG. 39, the distal spine shaft **2350** has a proximal end portion **2351** that is slidably received within a slot **2355** in a proximal spine shaft **2353** that is non-movably supported within the hollow outer tube **2340** by at least one support collar **2357**. As can be further seen in FIGS. 39 and 40, the surgical tool **2300** includes a closure tube **2370** that is constrained to only move axially relative to the distal stationary base portion **2360**. The closure tube **2370** has a proximal end **2372** that has an internal thread **2374** formed therein that is in threaded engagement with a transmission arrangement, generally depicted as **2375** that is operably supported on the tool mounting plate **2462**. In various forms, the transmission arrangement **2375** includes a rotary drive shaft assembly, generally designated as **2381**. When rotated, the rotary drive shaft assembly **2381** will cause the closure tube **2370** to move axially as will be describe in further detail below. In at least one form, the rotary drive shaft assembly **2381** includes a closure drive nut **2382** of a closure clutch assembly generally designated as **2380**. More specifically, the closure drive nut **2382** has a proximal end portion **2384** that is rotatably supported relative to the outer tube **2340** and is in threaded engagement with the closure tube **2370**. For assembly purposes, the proximal end portion **2384** may be threadably attached to a retention ring **2386**. Retention ring **2386**, in cooperation with an end **2387** of the closure drive nut **2382**, defines an annular slot **2388** into which a shoulder **2392** of a locking collar **2390** extends. The locking collar **2390** is non-movably attached (e.g., welded, glued, etc.) to the end of the outer tube **2340**. Such arrangement serves to affix the closure drive nut **2382** to the outer tube **2340** while enabling the closure drive nut **2382** to rotate relative to the outer tube **2340**.

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The closure drive nut **2382** further has a distal end **2383** that has a threaded portion **2385** that threadably engages the internal thread **2374** of the closure tube **2370**. Thus, rotation of the closure drive nut **2382** will cause the closure tube **2370** to move axially as represented by arrow “D” in FIG. 40.

Closure of the anvil **2324** and actuation of the cutting instrument **2332** are accomplished by control motions that are transmitted by a hollow drive sleeve **2400**. As can be seen in FIGS. 39 and 40, the hollow drive sleeve **2400** is rotatably and slidably received on the distal spine shaft **2350**. The drive sleeve **2400** has a proximal end portion **2401** that is rotatably mounted to the proximal spine shaft **2353** that protrudes from the tool mounting portion **2460** such that the drive sleeve **2400** may rotate relative thereto. See FIG. 39. As can also be seen in FIGS. 39-41, the drive sleeve **2400** is rotated about the longitudinal tool axis “LT-LT” by a drive shaft **2440**. The drive shaft **2440** has a drive gear **2444** that is attached to its distal end **2442** and is in meshing engagement with a driven gear **2450** that is attached to the drive sleeve **2400**.

The drive sleeve **2400** further has a distal end portion **2402** that is coupled to a closure clutch **2410** portion of the closure clutch assembly **2380** that has a proximal face **2412** and a distal face **2414**. The proximal face **2412** has a series of proximal teeth **2416** formed thereon that are adapted for selective engagement with corresponding proximal teeth cavities **2418** formed in the proximal end portion **2384** of the closure drive nut **2382**. Thus, when the proximal teeth **2416** are in meshing engagement with the proximal teeth cavities **2418** in the closure drive nut **2382**, rotation of the drive sleeve **2400** will result in rotation of the closure drive nut **2382** and ultimately cause the closure tube **2370** to move axially as will be discussed in further detail below.

As can be most particularly seen in FIGS. 39 and 40, the distal face **2414** of the drive clutch portion **2410** has a series of distal teeth **2415** formed thereon that are adapted for selective engagement with corresponding distal teeth cavities **2426** formed in a face plate portion **2424** of a knife drive shaft assembly **2420**. In various embodiments, the knife drive shaft assembly **2420** comprises a hollow knife shaft segment **2430** that is rotatably received on a corresponding portion of the distal spine shaft **2350** that is attached to or protrudes from the stationary base **2360**. When the distal teeth **2415** of the closure clutch portion **2410** are in meshing engagement with the distal teeth cavities **2426** in the face plate portion **2424**, rotation of the drive sleeve **2400** will result in rotation of the drive shaft segment **2430** about the stationary shaft **2350**. As can be seen in FIGS. 44-46, a knife drive gear **2432** is attached to the drive shaft segment **2430** and is in meshing engagement with a drive knife gear **2434** that is attached to the end effector drive shaft **2336**. Thus, rotation of the drive shaft segment **2430** will result in the rotation of the end effector drive shaft **2336** to drive the cutting instrument **2332** and sled **2333** distally through the surgical staple cartridge **2334** to cut and staple tissue clamped within the surgical end effector **2312**. The sled **2333** may be made of, for example, plastic, and may have a sloped distal surface. As the sled **2333** traverses the elongated channel **2322**, the sloped forward surface of the sled **2333** pushes up or “drive” the staples in the surgical staple cartridge **2334** through the clamped tissue and against the anvil **2324**. The anvil **2324** turns or “forms” the staples, thereby stapling the severed tissue. As used herein, the term “fire” refers to the initiation of actions required to drive the cutting instrument and sled portion in a distal direction through the surgical staple cartridge to cut the tissue clamped in the surgical end effector and drive the staples through the severed tissue.

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In use, it may be desirable to rotate the surgical end effector **2312** about the longitudinal tool axis LT-LT. In at least one embodiment, the transmission arrangement **2375** includes a rotational transmission assembly **2465** that is configured to receive a corresponding rotary output motion from the tool drive assembly **1010** of the robotic system **1000** and convert that rotary output motion to a rotary control motion for rotating the elongated shaft assembly **2308** (and surgical end effector **2312**) about the longitudinal tool axis LT-LT. As can be seen in FIG. 42, a proximal end **2341** of the outer tube **2340** is rotatably supported within a cradle arrangement **2343** attached to the tool mounting plate **2462** of the tool mounting portion **2460**. A rotation gear **2345** is formed on or attached to the proximal end **2341** of the outer tube **2340** of the elongated shaft assembly **2308** for meshing engagement with a rotation gear assembly **2470** operably supported on the tool mounting plate **2462**. In at least one embodiment, a rotation drive gear **2472** is coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **2462** when the tool mounting portion **2460** is coupled to the tool drive assembly **1010**. See FIGS. 26 and 42. The rotation drive assembly **2470** further comprises a rotary driven gear **2474** that is rotatably supported on the tool mounting plate **2462** in meshing engagement with the rotation gear **2345** and the rotation drive gear **2472**. Application of a first rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **2472** by virtue of being operably coupled thereto. Rotation of the rotation drive gear **2472** ultimately results in the rotation of the elongated shaft assembly **2308** (and the end effector **2312**) about the longitudinal tool axis LT-LT (primary rotary motion).

Closure of the anvil **2324** relative to the staple cartridge **2034** is accomplished by axially moving the closure tube **2370** in the distal direction “DD”. Axial movement of the closure tube **2370** in the distal direction “DD” is accomplished by applying a rotary control motion to the closure drive nut **2382**. To apply the rotary control motion to the closure drive nut **2382**, the closure clutch **2410** must first be brought into meshing engagement with the proximal end portion **2384** of the closure drive nut **2382**. In various embodiments, the transmission arrangement **2375** further includes a shifter drive assembly **2480** that is operably supported on the tool mounting plate **2462**. More specifically and with reference to FIG. 42, it can be seen that a proximal end portion **2359** of the proximal spine portion **2353** extends through the rotation gear **2345** and is rotatably coupled to a shifter gear rack **2481** that is slidably affixed to the tool mounting plate **2462** through slots **2482**. The shifter drive assembly **2480** further comprises a shifter drive gear **2483** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **2462** when the tool mounting portion **2460** is coupled to the tool holder **1270**. See FIGS. 26 and 42. The shifter drive assembly **2480** further comprises a shifter driven gear **2478** that is rotatably supported on the tool mounting plate **2462** in meshing engagement with the shifter drive gear **2483** and the shifter rack gear **2482**. Application of a second rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding driven element **1304** will thereby cause rotation of the shifter drive gear **2483** by virtue of being operably coupled thereto. Rotation of the shifter drive gear **2483** ultimately results in the axial movement of the shifter gear rack **2482** and the proximal spine portion **2353** as well as the drive sleeve **2400** and the closure clutch **2410** attached thereto. The direction of axial travel of the closure clutch

2410 depends upon the direction in which the shifter drive gear 2483 is rotated by the robotic system 1000. Thus, rotation of the shifter drive gear 2483 in a first rotary direction will result in the axial movement of the closure clutch 2410 in the proximal direction "PD" to bring the proximal teeth 2416 into meshing engagement with the proximal teeth cavities 2418 in the closure drive nut 2382. Conversely, rotation of the shifter drive gear 2483 in a second rotary direction (opposite to the first rotary direction) will result in the axial movement of the closure clutch 2410 in the distal direction "DD" to bring the distal teeth 2415 into meshing engagement with corresponding distal teeth cavities 2426 formed in the face plate portion 2424 of the knife drive shaft assembly 2420.

Once the closure clutch 2410 has been brought into meshing engagement with the closure drive nut 2382, the closure drive nut 2382 is rotated by rotating the closure clutch 2410. Rotation of the closure clutch 2410 is controlled by applying rotary output motions to a rotary drive transmission portion 2490 of transmission arrangement 2375 that is operably supported on the tool mounting plate 2462 as shown in FIG. 42. In at least one embodiment, the rotary drive transmission 2490 includes a rotary drive assembly 2490' that includes a gear 2491 that is coupled to a corresponding third one of the driven discs or elements 1304 on the adapter side of the tool mounting plate 2462 when the tool mounting portion 2460 is coupled to the tool holder 1270. See FIGS. 26 and 42. The rotary drive transmission 2490 further comprises a first rotary driven gear 2492 that is rotatably supported on the tool mounting plate 2462 in meshing engagement with a second rotary driven gear 2493 and the rotary drive gear 2491. The second rotary driven gear 2493 is coupled to a proximal end portion 2443 of the drive shaft 2440.

Rotation of the rotary drive gear 2491 in a first rotary direction will result in the rotation of the drive shaft 2440 in a first direction. Conversely, rotation of the rotary drive gear 2491 in a second rotary direction (opposite to the first rotary direction) will cause the drive shaft 2440 to rotate in a second direction. As indicated above, the drive shaft 2440 has a drive gear 2444 that is attached to its distal end 2442 and is in meshing engagement with a driven gear 2450 that is attached to the drive sleeve 2400. Thus, rotation of the drive shaft 2440 results in rotation of the drive sleeve 2400.

A method of operating the surgical tool 2300 will now be described. Once the tool mounting portion 2462 has been operably coupled to the tool holder 1270 of the robotic system 1000 and oriented into position adjacent the target tissue to be cut and stapled, if the anvil 2334 is not already in the open position (FIG. 39), the robotic system 1000 may apply the first rotary output motion to the shifter drive gear 2483 which results in the axial movement of the closure clutch 2410 into meshing engagement with the closure drive nut 2382 (if it is not already in meshing engagement therewith). See FIG. 40. Once the controller 1001 of the robotic system 1000 has confirmed that the closure clutch 2410 is meshing engagement with the closure drive nut 2382 (e.g., by means of sensor(s) in the surgical end effector 2312 that are in communication with the robotic control system), the robotic controller 1001 may then apply a second rotary output motion to the rotary drive gear 2492 which, as was described above, ultimately results in the rotation of the rotary drive nut 2382 in the first direction which results in the axial travel of the closure tube 2370 in the distal direction "DD". As the closure tube 2370 moved in the distal direction, it contacts a portion of the anvil 2323 and causes the anvil 2324 to pivot to the closed position to clamp the target tissue between the anvil 2324 and the surgical staple cartridge 2334. Once the robotic controller 1001 determines that the anvil 2334 has been piv-

oted to the closed position by corresponding sensor(s) in the surgical end effector 2312 in communication therewith, the robotic system 1000 discontinues the application of the second rotary output motion to the rotary drive gear 2491. The robotic controller 1001 may also provide the surgeon with an indication that the anvil 2334 has been fully closed. The surgeon may then initiate the firing procedure. In alternative embodiments, the firing procedure may be automatically initiated by the robotic controller 1001. The robotic controller 1001 then applies the primary rotary control motion 2483 to the shifter drive gear 2483 which results in the axial movement of the closure clutch 2410 into meshing engagement with the face plate portion 2424 of the knife drive shaft assembly 2420. See FIG. 41. Once the controller 1001 of the robotic system 1000 has confirmed that the closure clutch 2410 is meshing engagement with the face plate portion 2424 (by means of sensor(s) in the end effector 2312 that are in communication with the robotic controller 1001), the robotic controller 1001 may then apply the second rotary output motion to the rotary drive gear 2492 which, as was described above, ultimately results in the axial movement of the cutting instrument 2332 and sled portion 2333 in the distal direction "DD" through the surgical staple cartridge 2334. As the cutting instrument 2332 moves distally through the surgical staple cartridge 2334, the tissue clamped therein is severed. As the sled portion 2333 is driven distally, it causes the staples within the surgical staple cartridge to be driven through the severed tissue into forming contact with the anvil 2324. Once the robotic controller 1001 has determined that the cutting instrument 2324 has reached the end position within the surgical staple cartridge 2334 (by means of sensor(s) in the end effector 2312 that are in communication with the robotic controller 1001), the robotic controller 1001 discontinues the application of the second rotary output motion to the rotary drive gear 2491. Thereafter, the robotic controller 1001 applies the secondary rotary output motion to the rotary drive gear 2491 which ultimately results in the axial travel of the cutting instrument 2332 and sled portion 2333 in the proximal direction "PD" to the starting position. Once the robotic controller 1001 has determined that the cutting instrument 2324 has reached the starting position by means of sensor(s) in the surgical end effector 2312 that are in communication with the robotic controller 1001, the robotic controller 1001 discontinues the application of the secondary rotary output motion to the rotary drive gear 2491. Thereafter, the robotic controller 1001 applies the primary rotary output motion to the shifter drive gear 2483 to cause the closure clutch 2410 to move into engagement with the rotary drive nut 2382. Once the closure clutch 2410 has been moved into meshing engagement with the rotary drive nut 2382, the robotic controller 1001 then applies the secondary output motion to the rotary drive gear 2491 which ultimately results in the rotation of the rotary drive nut 2382 in the second direction to cause the closure tube 2370 to move in the proximal direction "PD". As can be seen in FIGS. 39-41, the closure tube 2370 has an opening 2345 therein that engages the tab 2327 on the anvil 2324 to cause the anvil 2324 to pivot to the open position. In alternative embodiments, a spring may also be employed to pivot the anvil 2324 to the open position when the closure tube 2370 has been returned to the starting position (FIG. 39).

FIGS. 43-47 illustrate yet another surgical tool 2500 that may be effectively employed in connection with the robotic system 1000. In various forms, the surgical tool 2500 includes a surgical end effector 2512 that includes a "first portion" in the form of an elongated channel 2522 and a "second movable portion" in the form of a pivotally translatable clamping member, such as an anvil 2524, which are maintained at a

spacing that assures effective stapling and severing of tissue clamped in the surgical end effector **2512**. As shown in the illustrated embodiment, the surgical end effector **2512** may include, in addition to the previously-mentioned elongated channel **2522** and anvil **2524**, a “third movable portion” in the form of a cutting instrument **2532**, a sled (not shown), and a surgical staple cartridge **2534** that is removably seated in the elongated channel **2522**. The cutting instrument **2532** may be, for example, a knife. The anvil **2524** may be pivotably opened and closed at a pivot point **2525** connected to the proximate end of the elongated channel **2522**. The anvil **2524** may also include a tab **2527** at its proximate end that is configured to operably interface with a component of the mechanical closure system (described further below) to open and close the anvil **2524**. When actuated, the knife **2532** and sled travel longitudinally along the elongated channel **2522**, thereby cutting tissue clamped within the surgical end effector **2512**. The movement of the sled along the elongated channel **2522** causes the staples of the surgical staple cartridge **2534** to be driven through the severed tissue and against the closed anvil **2524**, which turns the staples to fasten the severed tissue. In one form, the elongated channel **2522** and the anvil **2524** may be made of an electrically conductive material (such as metal) so that they may serve as part of the antenna that communicates with sensor(s) in the surgical end effector, as described above. The surgical staple cartridge **2534** could be made of a nonconductive material (such as plastic) and the sensor may be connected to or disposed in the surgical staple cartridge **2534**, as described above.

It should be noted that although the embodiments of the surgical tool **2500** described herein employ a surgical end effector **2512** that staples the severed tissue, in other embodiments different techniques for fastening or sealing the severed tissue may be used. For example, end effectors that use RF energy or adhesives to fasten the severed tissue may also be used. U.S. Pat. No. 5,709,680, entitled “Electrosurgical Hemostatic Device” to Yates et al., and U.S. Pat. No. 5,688,270, entitled “Electrosurgical Hemostatic Device With Recessed And/Or Offset Electrodes” to Yates et al., which are incorporated herein by reference, discloses cutting instruments that use RF energy to fasten the severed tissue. U.S. patent application Ser. No. 11/267,811 to Morgan et al., now U.S. Pat. No. 7,673,783 and U.S. patent application Ser. No. 11/267,383 to Shelton et al., now U.S. Pat. No. 7,607,557, which are also incorporated herein by reference, disclose cutting instruments that use adhesives to fasten the severed tissue. Accordingly, although the description herein refers to cutting/stapling operations and the like, it should be recognized that this is an exemplary embodiment and is not meant to be limiting. Other tissue-fastening techniques may also be used.

In the illustrated embodiment, the elongated channel **2522** of the surgical end effector **2512** is coupled to an elongated shaft assembly **2508** that is coupled to a tool mounting portion **2600**. In at least one embodiment, the elongated shaft assembly **2508** comprises a hollow spine tube **2540** that is non-movably coupled to a tool mounting plate **2602** of the tool mounting portion **2600**. As can be seen in FIGS. **44** and **45**, the proximal end **2523** of the elongated channel **2522** comprises a hollow tubular structure configured to be attached to the distal end **2541** of the spine tube **2540**. In one embodiment, for example, the proximal end **2523** of the elongated channel **2522** is welded or glued to the distal end of the spine tube **2540**.

As can be further seen in FIGS. **44** and **45**, in at least one non-limiting embodiment, the surgical tool **2500** further includes an axially movable actuation member in the form of

a closure tube **2550** that is constrained to move axially relative to the elongated channel **2522** and the spine tube **2540**. The closure tube **2550** has a proximal end **2552** that has an internal thread **2554** formed therein that is in threaded engagement with a rotatably movable portion in the form of a closure drive nut **2560**. More specifically, the closure drive nut **2560** has a proximal end portion **2562** that is rotatably supported relative to the elongated channel **2522** and the spine tube **2540**. For assembly purposes, the proximal end portion **2562** is threadably attached to a retention ring **2570**. The retention ring **2570** is received in a groove **2529** formed between a shoulder **2527** on the proximal end **2523** of the elongated channel **2522** and the distal end **2541** of the spine tube **2540**. Such arrangement serves to rotatably support the closure drive nut **2560** within the elongated channel **2522**. Rotation of the closure drive nut **2560** will cause the closure tube **2550** to move axially as represented by arrow “D” in FIG. **44**.

Extending through the spine tube **2540** and the closure drive nut **2560** is a drive member which, in at least one embodiment, comprises a knife bar **2580** that has a distal end portion **2582** that is rotatably coupled to the cutting instrument **2532** such that the knife bar **2580** may rotate relative to the cutting instrument **2582**. As can be seen in FIG. **44-46**, the closure drive nut **2560** has a slot **2564** therein through which the knife bar **2580** can slidably extend. Such arrangement permits the knife bar **2580** to move axially relative to the closure drive nut **2560**. However, rotation of the knife bar **2580** about the longitudinal tool axis LT-LT will also result in the rotation of the closure drive nut **2560**. The axial direction in which the closure tube **2550** moves ultimately depends upon the direction in which the knife bar **2580** and the closure drive nut **2560** are rotated. As the closure tube **2550** is driven distally, the distal end thereof will contact the anvil **2524** and cause the anvil **2524** to pivot to a closed position. Upon application of an opening rotary output motion from the robotic system **1000**, the closure tube **2550** will be driven in the proximal direction “PD” and pivot the anvil **2524** to the open position by virtue of the engagement of the tab **2527** with the opening **2555** in the closure tube **2550**.

In use, it may be desirable to rotate the surgical end effector **2512** about the longitudinal tool axis LT-LT. In at least one embodiment, the tool mounting portion **2600** is configured to receive a corresponding first rotary output motion from the robotic system **1000** and convert that first rotary output motion to a rotary control motion for rotating the elongated shaft assembly **2508** about the longitudinal tool axis LT-LT. As can be seen in FIG. **42**, a proximal end **2542** of the hollow spine tube **2540** is rotatably supported within a cradle arrangement **2603** attached to a tool mounting plate **2602** of the tool mounting portion **2600**. Various embodiments of the surgical tool **2500** further include a transmission arrangement, generally depicted as **2605**, that is operably supported on the tool mounting plate **2602**. In various forms the transmission arrangement **2605** include a rotation gear **2544** that is formed on or attached to the proximal end **2542** of the spine tube **2540** for meshing engagement with a rotation drive assembly **2610** that is operably supported on the tool mounting plate **2602**. In at least one embodiment, a rotation drive gear **2612** is coupled to a corresponding first one of the rotational bodies, driven discs or elements **1304** on the adapter side of the tool mounting plate **2602** when the tool mounting portion **2600** is coupled to the tool holder **1270**. See FIGS. **26** and **47**. The rotation drive assembly **2610** further comprises a rotary driven gear **2614** that is rotatably supported on the tool mounting plate **2602** in meshing engagement with the rotation gear **2544** and the rotation drive gear **2612**. Application of a first rotary output motion from the

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robotic system 1000 through the tool drive assembly 1010 to the corresponding driven rotational body 1304 will thereby cause rotation of the rotation drive gear 2612 by virtue of being operably coupled thereto. Rotation of the rotation drive gear 2612 ultimately results in the rotation of the elongated shaft assembly 2508 (and the end effector 2512) about the longitudinal tool axis LT-LT.

Closure of the anvil 2524 relative to the surgical staple cartridge 2534 is accomplished by axially moving the closure tube 2550 in the distal direction "DD". Axial movement of the closure tube 2550 in the distal direction "DD" is accomplished by applying a rotary control motion to the closure drive nut 2382. In various embodiments, the closure drive nut 2560 is rotated by applying a rotary output motion to the knife bar 2580. Rotation of the knife bar 2580 is controlled by applying rotary output motions to a rotary closure system 2620 that is operably supported on the tool mounting plate 2602 as shown in FIG. 47. In at least one embodiment, the rotary closure system 2620 includes a closure drive gear 2622 that is coupled to a corresponding second one of the driven rotatable body portions discs or elements 1304 on the adapter side of the tool mounting plate 2462 when the tool mounting portion 2600 is coupled to the tool holder 1270. See FIGS. 26 and 47. The closure drive gear 2622, in at least one embodiment, is in meshing driving engagement with a closure gear train, generally depicted as 2623. The closure gear drive train 2623 comprises a first driven closure gear 2624 that is rotatably supported on the tool mounting plate 2602. The first closure driven gear 2624 is attached to a second closure driven gear 2626 by a drive shaft 2628. The second closure driven gear 2626 is in meshing engagement with a third closure driven gear 2630 that is rotatably supported on the tool mounting plate 2602. Rotation of the closure drive gear 2622 in a second rotary direction will result in the rotation of the third closure driven gear 2630 in a second direction. Conversely, rotation of the closure drive gear 2483 in a secondary rotary direction (opposite to the second rotary direction) will cause the third closure driven gear 2630 to rotate in a secondary direction.

As can be seen in FIG. 47, a drive shaft assembly 2640 is coupled to a proximal end of the knife bar 2580. In various embodiments, the drive shaft assembly 2640 includes a proximal portion 2642 that has a square cross-sectional shape. The proximal portion 2642 is configured to slideably engage a correspondingly shaped aperture in the third driven gear 2630. Such arrangement results in the rotation of the drive shaft assembly 2640 (and knife bar 2580) when the third driven gear 2630 is rotated. The drive shaft assembly 2640 is axially advanced in the distal and proximal directions by a knife drive assembly 2650. One form of the knife drive assembly 2650 comprises a rotary drive gear 2652 that is coupled to a corresponding third one of the driven rotatable body portions, discs or elements 1304 on the adapter side of the tool mounting plate 2462 when the tool mounting portion 2600 is coupled to the tool holder 1270. See FIGS. 26 and 47. The rotary driven gear 2652 is in meshing driving engagement with a gear train, generally depicted as 2653. In at least one form, the gear train 2653 further comprises a first rotary driven gear assembly 2654 that is rotatably supported on the tool mounting plate 2602. The first rotary driven gear assembly 2654 is in meshing engagement with a third rotary driven gear assembly 2656 that is rotatably supported on the tool mounting plate 2602 and which is in meshing engagement with a fourth rotary driven gear assembly 2658 that is in meshing engagement with a threaded portion 2644 of the drive shaft assembly 2640. Rotation of the rotary drive gear 2652 in a third rotary direction will result in the axial

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advancement of the drive shaft assembly 2640 and knife bar 2580 in the distal direction "DD". Conversely, rotation of the rotary drive gear 2652 in a tertiary rotary direction (opposite to the third rotary direction) will cause the drive shaft assembly 2640 and the knife bar 2580 to move in the proximal direction.

A method of operating the surgical tool 2500 will now be described. Once the tool mounting portion 2600 has been operably coupled to the tool holder 1270 of the robotic system 1000, the robotic system 1000 can orient the surgical end effector 2512 in position adjacent the target tissue to be cut and stapled. If the anvil 2524 is not already in the open position (FIG. 44), the robotic system 1000 may apply the second rotary output motion to the closure drive gear 2622 which results in the rotation of the knife bar 2580 in a second direction. Rotation of the knife bar 2580 in the second direction results in the rotation of the closure drive nut 2560 in a second direction. As the closure drive nut 2560 rotates in the second direction, the closure tube 2550 moves in the proximal direction "PD". As the closure tube 2550 moves in the proximal direction "PD", the tab 2527 on the anvil 2524 interfaces with the opening 2555 in the closure tube 2550 and causes the anvil 2524 to pivot to the open position. In addition or in alternative embodiments, a spring (not shown) may be employed to pivot the anvil 2354 to the open position when the closure tube 2550 has been returned to the starting position (FIG. 44). The opened surgical end effector 2512 may then be manipulated by the robotic system 1000 to position the target tissue between the open anvil 2524 and the surgical staple cartridge 2534. Thereafter, the surgeon may initiate the closure process by activating the robotic control system 1000 to apply the second rotary output motion to the closure drive gear 2622 which, as was described above, ultimately results in the rotation of the closure drive nut 2382 in the second direction which results in the axial travel of the closure tube 2250 in the distal direction "DD". As the closure tube 2550 moves in the distal direction, it contacts a portion of the anvil 2524 and causes the anvil 2524 to pivot to the closed position to clamp the target tissue between the anvil 2524 and the staple cartridge 2534. Once the robotic controller 1001 determines that the anvil 2524 has been pivoted to the closed position by corresponding sensor(s) in the end effector 2512 that are in communication therewith, the robotic controller 1001 discontinues the application of the second rotary output motion to the closure drive gear 2622. The robotic controller 1001 may also provide the surgeon with an indication that the anvil 2524 has been fully closed. The surgeon may then initiate the firing procedure. In alternative embodiments, the firing procedure may be automatically initiated by the robotic controller 1001.

After the robotic controller 1001 has determined that the anvil 2524 is in the closed position, the robotic controller 1001 then applies the third rotary output motion to the rotary drive gear 2652 which results in the axial movement of the drive shaft assembly 2640 and knife bar 2580 in the distal direction "DD". As the cutting instrument 2532 moves distally through the surgical staple cartridge 2534, the tissue clamped therein is severed. As the sled portion (not shown) is driven distally, it causes the staples within the surgical staple cartridge 2534 to be driven through the severed tissue into forming contact with the anvil 2524. Once the robotic controller 1001 has determined that the cutting instrument 2532 has reached the end position within the surgical staple cartridge 2534 by means of sensor(s) in the surgical end effector 2512 that are in communication with the robotic controller 1001, the robotic controller 1001 discontinues the application of the second rotary output motion to the rotary drive gear

2652. Thereafter, the robotic controller **1001** applies the secondary rotary control motion to the rotary drive gear **2652** which ultimately results in the axial travel of the cutting instrument **2532** and sled portion in the proximal direction “PD” to the starting position. Once the robotic controller **1001** has determined that the cutting instrument **2524** has reached the starting position by means of sensor(s) in the end effector **2512** that are in communication with the robotic controller **1001**, the robotic controller **1001** discontinues the application of the secondary rotary output motion to the rotary drive gear **2652**. Thereafter, the robotic controller **1001** may apply the secondary rotary output motion to the closure drive gear **2622** which results in the rotation of the knife bar **2580** in a secondary direction. Rotation of the knife bar **2580** in the secondary direction results in the rotation of the closure drive nut **2560** in a secondary direction. As the closure drive nut **2560** rotates in the secondary direction, the closure tube **2550** moves in the proximal direction “PD” to the open position.

FIGS. 48-53B illustrate yet another surgical tool **2700** that may be effectively employed in connection with the robotic system **1000**. In various forms, the surgical tool **2700** includes a surgical end effector **2712** that includes a “first portion” in the form of an elongated channel **2722** and a “second movable portion” in on form comprising a pivotally translatable clamping member, such as an anvil **2724**, which are maintained at a spacing that assures effective stapling and severing of tissue clamped in the surgical end effector **2712**. As shown in the illustrated embodiment, the surgical end effector **2712** may include, in addition to the previously-mentioned channel **2722** and anvil **2724**, a “third movable portion” in the form of a cutting instrument **2732**, a sled (not shown), and a surgical staple cartridge **2734** that is removably seated in the elongated channel **2722**. The cutting instrument **2732** may be, for example, a knife. The anvil **2724** may be pivotably opened and closed at a pivot point **2725** connected to the proximal end of the elongated channel **2722**. The anvil **2724** may also include a tab **2727** at its proximal end that interfaces with a component of the mechanical closure system (described further below) to open and close the anvil **2724**. When actuated, the knife **2732** and sled to travel longitudinally along the elongated channel **2722**, thereby cutting tissue clamped within the surgical end effector **2712**. The movement of the sled along the elongated channel **2722** causes the staples of the surgical staple cartridge **2734** to be driven through the severed tissue and against the closed anvil **2724**, which turns the staples to fasten the severed tissue. In one form, the elongated channel **2722** and the anvil **2724** may be made of an electrically conductive material (such as metal) so that they may serve as part of the antenna that communicates with sensor(s) in the surgical end effector, as described above. The surgical staple cartridge **2734** could be made of a nonconductive material (such as plastic) and the sensor may be connected to or disposed in the surgical staple cartridge **2734**, as described above.

It should be noted that although the embodiments of the surgical tool **2500** described herein employ a surgical end effector **2712** that staples the severed tissue, in other embodiments different techniques for fastening or sealing the severed tissue may be used. For example, end effectors that use RF energy or adhesives to fasten the severed tissue may also be used. U.S. Pat. No. 5,709,680, entitled “Electrosurgical Hemostatic Device” to Yates et al., and U.S. Pat. No. 5,688,270, entitled “Electrosurgical Hemostatic Device With Recessed And/Or Offset Electrodes” to Yates et al., which are incorporated herein by reference, discloses cutting instruments that use RF energy to fasten the severed tissue. U.S.

patent application Ser. No. 11/267,811 to Morgan et al., now U.S. Pat. No. 7,673,783 and U.S. patent application Ser. No. 11/267,383 to Shelton et al., now U.S. Pat. No. 7,607,557, which are also incorporated herein by reference, disclose cutting instruments that use adhesives to fasten the severed tissue. Accordingly, although the description herein refers to cutting/stapling operations and the like, it should be recognized that this is an exemplary embodiment and is not meant to be limiting. Other tissue-fastening techniques may also be used.

In the illustrated embodiment, the elongated channel **2722** of the surgical end effector **2712** is coupled to an elongated shaft assembly **2708** that is coupled to a tool mounting portion **2900**. Although not shown, the elongated shaft assembly **2708** may include an articulation joint to permit the surgical end effector **2712** to be selectively articulated about an axis that is substantially transverse to the tool axis LT-LT. In at least one embodiment, the elongated shaft assembly **2708** comprises a hollow spine tube **2740** that is non-movably coupled to a tool mounting plate **2902** of the tool mounting portion **2900**. As can be seen in FIGS. 49 and 50, the proximal end **2723** of the elongated channel **2722** comprises a hollow tubular structure that is attached to the spine tube **2740** by means of a mounting collar **2790**. A cross-sectional view of the mounting collar **2790** is shown in FIG. 51. In various embodiments, the mounting collar **2790** has a proximal flanged end **2791** that is configured for attachment to the distal end of the spine tube **2740**. In at least one embodiment, for example, the proximal flanged end **2791** of the mounting collar **2790** is welded or glued to the distal end of the spine tube **2740**. As can be further seen in FIGS. 54 and 55, the mounting collar **2790** further has a mounting hub portion **2792** that is sized to receive the proximal end **2723** of the elongated channel **2722** thereon. The proximal end **2723** of the elongated channel **2722** is non-movably attached to the mounting hub portion **2792** by, for example, welding, adhesive, etc.

As can be further seen in FIGS. 49 and 50, the surgical tool **2700** further includes an axially movable actuation member in the form of a closure tube **2750** that is constrained to move axially relative to the elongated channel **2722**. The closure tube **2750** has a proximal end **2752** that has an internal thread **2754** formed therein that is in threaded engagement with a rotatably movable portion in the form of a closure drive nut **2760**. More specifically, the closure drive nut **2760** has a proximal end portion **2762** that is rotatably supported relative to the elongated channel **2722** and the spine tube **2740**. For assembly purposes, the proximal end portion **2762** is threadably attached to a retention ring **2770**. The retention ring **2770** is received in a groove **2729** formed between a shoulder **2727** on the proximal end **2723** of the channel **2722** and the mounting hub **2729** of the mounting collar **2790**. Such arrangement serves to rotatably support the closure drive nut **2760** within the channel **2722**. Rotation of the closure drive nut **2760** will cause the closure tube **2750** to move axially as represented by arrow “D” in FIG. 49.

Extending through the spine tube **2740**, the mounting collar **2790**, and the closure drive nut **2760** is a drive member, which in at least one embodiment, comprises a knife bar **2780** that has a distal end portion **2782** that is coupled to the cutting instrument **2732**. As can be seen in FIGS. 49 and 50, the mounting collar **2790** has a passage **2793** therethrough for permitting the knife bar **2780** to slidably pass therethrough. Similarly, the closure drive nut **2760** has a slot **2764** therein through which the knife bar **2780** can slidably extend. Such arrangement permits the knife bar **2780** to move axially relative to the closure drive nut **2760**.

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Actuation of the anvil **2724** is controlled by a rotary driven closure shaft **2800**. As can be seen in FIGS. **49** and **50**, a distal end portion **2802** of the closure drive shaft **2800** extends through a passage **2794** in the mounting collar **2790** and a closure gear **2804** is attached thereto. The closure gear **2804** is configured for driving engagement with the inner surface **2761** of the closure drive nut **2760**. Thus, rotation of the closure shaft **2800** will also result in the rotation of the closure drive nut **2760**. The axial direction in which the closure tube **2750** moves ultimately depends upon the direction in which the closure shaft **2800** and the closure drive nut **2760** are rotated. For example, in response to one rotary closure motion received from the robotic system **1000**, the closure tube **2750** will be driven in the distal direction "DD". As the closure tube **2750** is driven distally, the opening **2745** will engage the tab **2727** on the anvil **2724** and cause the anvil **2724** to pivot to a closed position. Upon application of an opening rotary motion from the robotic system **1000**, the closure tube **2750** will be driven in the proximal direction "PD" and pivot the anvil **2724** to the open position. In various embodiments, a spring (not shown) may be employed to bias the anvil **2724** to the open position (FIG. **49**).

In use, it may be desirable to rotate the surgical end effector **2712** about the longitudinal tool axis LT-LT. In at least one embodiment, the tool mounting portion **2900** is configured to receive a corresponding first rotary output motion from the robotic system **1000** for rotating the elongated shaft assembly **2708** about the tool axis LT-LT. As can be seen in FIG. **53**, a proximal end **2742** of the hollow spine tube **2740** is rotatably supported within a cradle arrangement **2903** and a bearing assembly **2904** that are attached to a tool mounting plate **2902** of the tool mounting portion **2900**. A rotation gear **2744** is formed on or attached to the proximal end **2742** of the spine tube **2740** for meshing engagement with a rotation drive assembly **2910** that is operably supported on the tool mounting plate **2902**. In at least one embodiment, a rotation drive gear **2912** is coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **2602** when the tool mounting portion **2600** is coupled to the tool holder **1270**. See FIGS. **26** and **53**. The rotation drive assembly **2910** further comprises a rotary driven gear **2914** that is rotatably supported on the tool mounting plate **2902** in meshing engagement with the rotation gear **2744** and the rotation drive gear **2912**. Application of a first rotary control motion from the robotic system **1000** through the tool holder **1270** and the adapter **1240** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **2912** by virtue of being operably coupled thereto. Rotation of the rotation drive gear **2912** ultimately results in the rotation of the elongated shaft assembly **2708** (and the end effector **2712**) about the longitudinal tool axis LT-LT (primary rotary motion).

Closure of the anvil **2724** relative to the staple cartridge **2734** is accomplished by axially moving the closure tube **2750** in the distal direction "DD". Axial movement of the closure tube **2750** in the distal direction "DD" is accomplished by applying a rotary control motion to the closure drive nut **2760**. In various embodiments, the closure drive nut **2760** is rotated by applying a rotary output motion to the closure drive shaft **2800**. As can be seen in FIG. **53**, a proximal end portion **2806** of the closure drive shaft **2800** has a driven gear **2808** thereon that is in meshing engagement with a closure drive assembly **2920**. In various embodiments, the closure drive system **2920** includes a closure drive gear **2922** that is coupled to a corresponding second one of the driven rotational bodies or elements **1304** on the adapter side of the tool mounting plate **2462** when the tool mounting portion **2900** is coupled to the tool holder **1270**. See FIGS. **26** and **53**.

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The closure drive gear **2922** is supported in meshing engagement with a closure gear train, generally depicted as **2923**. In at least one form, the closure gear train **2923** comprises a first driven closure gear **2924** that is rotatably supported on the tool mounting plate **2902**. The first closure driven gear **2924** is attached to a second closure driven gear **2926** by a drive shaft **2928**. The second closure driven gear **2926** is in meshing engagement with a planetary gear assembly **2930**. In various embodiments, the planetary gear assembly **2930** includes a driven planetary closure gear **2932** that is rotatably supported within the bearing assembly **2904** that is mounted on tool mounting plate **2902**. As can be seen in FIGS. **53** and **53B**, the proximal end portion **2806** of the closure drive shaft **2800** is rotatably supported within the proximal end portion **2742** of the spine tube **2740** such that the driven gear **2808** is in meshing engagement with central gear teeth **2934** formed on the planetary gear **2932**. As can also be seen in FIG. **53A**, two additional support gears **2936** are attached to or rotatably supported relative to the proximal end portion **2742** of the spine tube **2740** to provide bearing support thereto. Such arrangement with the planetary gear assembly **2930** serves to accommodate rotation of the spine shaft **2740** by the rotation drive assembly **2910** while permitting the closure driven gear **2808** to remain in meshing engagement with the closure drive system **2920**. In addition, rotation of the closure drive gear **2922** in a first direction will ultimately result in the rotation of the closure drive shaft **2800** and closure drive nut **2760** which will ultimately result in the closure of the anvil **2724** as described above. Conversely, rotation of the closure drive gear **2922** in a second opposite direction will ultimately result in the rotation of the closure drive nut **2760** in an opposite direction which results in the opening of the anvil **2724**.

As can be seen in FIG. **53**, the proximal end **2784** of the knife bar **2780** has a threaded shaft portion **2786** attached thereto which is in driving engagement with a knife drive assembly **2940**. In various embodiments, the threaded shaft portion **2786** is rotatably supported by a bearing **2906** attached to the tool mounting plate **2902**. Such arrangement permits the threaded shaft portion **2786** to rotate and move axially relative to the tool mounting plate **2902**. The knife bar **2780** is axially advanced in the distal and proximal directions by the knife drive assembly **2940**. One form of the knife drive assembly **2940** comprises a rotary drive gear **2942** that is coupled to a corresponding third one of the rotatable bodies, driven discs or elements **1304** on the adapter side of the tool mounting plate **2902** when the tool mounting portion **2900** is coupled to the tool holder **1270**. See FIGS. **26** and **53**. The rotary drive gear **2942** is in meshing engagement with a knife gear train, generally depicted as **2943**. In various embodiments, the knife gear train **2943** comprises a first rotary driven gear assembly **2944** that is rotatably supported on the tool mounting plate **2902**. The first rotary driven gear assembly **2944** is in meshing engagement with a third rotary driven gear assembly **2946** that is rotatably supported on the tool mounting plate **2902** and which is in meshing engagement with a fourth rotary driven gear assembly **2948** that is in meshing engagement with the threaded portion **2786** of the knife bar **2780**. Rotation of the rotary drive gear **2942** in one direction will result in the axial advancement of the knife bar **2780** in the distal direction "DD". Conversely, rotation of the rotary drive gear **2942** in an opposite direction will cause the knife bar **2780** to move in the proximal direction. Tool **2700** may otherwise be used as described above.

FIGS. **54** and **55** illustrate a surgical tool embodiment **2700** that is substantially identical to tool **2700** that was described in detail above. However tool **2700'** includes a pressure sensor

2950 that is configured to provide feedback to the robotic controller 1001 concerning the amount of clamping pressure experienced by the anvil 2724. In various embodiments, for example, the pressure sensor may comprise a spring biased contact switch. For a continuous signal, it would use either a cantilever beam with a strain gage on it or a dome button top with a strain gage on the inside. Another version may comprise an off switch that contacts only at a known desired load. Such arrangement would include a dome on the based wherein the dome is one electrical pole and the base is the other electrical pole. Such arrangement permits the robotic controller 1001 to adjust the amount of clamping pressure being applied to the tissue within the surgical end effector 2712 by adjusting the amount of closing pressure applied to the anvil 2724. Those of ordinary skill in the art will understand that such pressure sensor arrangement may be effectively employed with several of the surgical tool embodiments described herein as well as their equivalent structures.

FIG. 56 illustrates a portion of another surgical tool 3000 that may be effectively used in connection with a robotic system 1000. The surgical tool 3003 employs on-board motor(s) for powering various components of a surgical end effector cutting instrument. In at least one non-limiting embodiment for example, the surgical tool 3000 includes a surgical end effector in the form of an endocutter (not shown) that has an anvil (not shown) and surgical staple cartridge arrangement (not shown) of the types and constructions described above. The surgical tool 3000 also includes an elongated shaft (not shown) and anvil closure arrangement (not shown) of the types described above. Thus, this portion of the Detailed Description will not repeat the description of those components beyond that which is necessary to appreciate the unique and novel attributes of the various embodiments of surgical tool 3000.

In the depicted embodiment, the end effector includes a cutting instrument 3002 that is coupled to a knife bar 3003. As can be seen in FIG. 56, the surgical tool 3000 includes a tool mounting portion 3010 that includes a tool mounting plate 3012 that is configured to mountably interface with the adaptor portion 1240' which is coupled to the robotic system 1000 in the various manners described above. The tool mounting portion 3010 is configured to operably support a transmission arrangement 3013 thereon. In at least one embodiment, the adaptor portion 1240' may be identical to the adaptor portion 1240 described in detail above without the powered rotation bodies and disc members employed by adaptor 1240. In other embodiments, the adaptor portion 1240' may be identical to adaptor portion 1240. Still other modifications which are considered to be within the spirit and scope of the various forms of the present invention may employ one or more of the mechanical motions (i.e., rotary motion(s)) from the tool holder portion 1270 (as described hereinabove) to power/actuate the transmission arrangement 3013 while also employing one or more motors within the tool mounting portion 3010 to power one or more other components of the surgical end effector. In addition, while the end effector of the depicted embodiment comprises an endocutter, those of ordinary skill in the art will understand that the unique and novel attributes of the depicted embodiment may be effectively employed in connection with other types of surgical end effectors without departing from the spirit and scope of various forms of the present invention.

In various embodiments, the tool mounting plate 3012 is configured to at least house a first firing motor 3011 for supplying firing and retraction motions to the knife bar 3003 which is coupled to or otherwise operably interfaces with the cutting instrument 3002. The tool mounting plate 3012 has an

array of electrical connecting pins 3014 which are configured to interface with the slots 1258 (FIG. 25) in the adapter 1240'. Such arrangement permits the controller 1001 of the robotic system 1000 to provide control signals to the electronic control circuit 3020 of the surgical tool 3000. While the interface is described herein with reference to mechanical, electrical, and magnetic coupling elements, it should be understood that a wide variety of telemetry modalities might be used, including infrared, inductive coupling, or the like.

Control circuit 3020 is shown in schematic form in FIG. 56. In one form or embodiment, the control circuit 3020 includes a power supply in the form of a battery 3022 that is coupled to an on-off solenoid powered switch 3024. Control circuit 3020 further includes an on/off firing solenoid 3026 that is coupled to a double pole switch 3028 for controlling the rotational direction of the motor 3011. Thus, when the controller 1001 of the robotic system 1000 supplies an appropriate control signal, switch 3024 will permit battery 3022 to supply power to the double pole switch 3028. The controller 1001 of the robotic system 1000 will also supply an appropriate signal to the double pole switch 3028 to supply power to the motor 3011. When it is desired to fire the surgical end effector (i.e., drive the cutting instrument 3002 distally through tissue clamped in the surgical end effector, the double pole switch 3028 will be in a first position. When it is desired to retract the cutting instrument 3002 to the starting position, the double pole switch 3028 will be moved to the second position by the controller 1001.

Various embodiments of the surgical tool 3000 also employ a gear box 3030 that is sized, in cooperation with a firing gear train 3031 that, in at least one non-limiting embodiment, comprises a firing drive gear 3032 that is in meshing engagement with a firing driven gear 3034 for generating a desired amount of driving force necessary to drive the cutting instrument 3002 through tissue and to drive and form staples in the various manners described herein. In the embodiment depicted in FIG. 56, the driven gear 3034 is coupled to a screw shaft 3036 that is in threaded engagement with a screw nut arrangement 3038 that is constrained to move axially (represented by arrow "D"). The screw nut arrangement 3038 is attached to the firing bar 3003. Thus, by rotating the screw shaft 3036 in a first direction, the cutting instrument 3002 is driven in the distal direction "DD" and rotating the screw shaft in an opposite second direction, the cutting instrument 3002 may be retracted in the proximal direction "PD".

FIG. 57 illustrates a portion of another surgical tool 3000' that is substantially identical to tool 3000 described above, except that the driven gear 3034 is attached to a drive shaft 3040. The drive shaft 3040 is attached to a second driver gear 3042 that is in meshing engagement with a third driven gear 3044 that is in meshing engagement with a screw 3046 coupled to the firing bar 3003.

FIG. 58 illustrates another surgical tool 3200 that may be effectively used in connection with a robotic system 1000. In this embodiment, the surgical tool 3200 includes a surgical end effector 3212 that in one non-limiting form, comprises a component portion that is selectively movable between first and second positions relative to at least one other end effector component portion. As will be discussed in further detail below, the surgical tool 3200 employs on-board motors for powering various components of a transmission arrangement 3305. The surgical end effector 3212 includes an elongated channel 3222 that operably supports a surgical staple cartridge 3234. The elongated channel 3222 has a proximal end 3223 that slidably extends into a hollow elongated shaft assembly 3208 that is coupled to a tool mounting portion 3300. In addition, the surgical end effector 3212 includes an

anvil **3224** that is pivotally coupled to the elongated channel **3222** by a pair of trunnions **3225** that are received within corresponding openings **3229** in the elongated channel **3222**. A distal end portion **3209** of the shaft assembly **3208** includes an opening **3245** into which a tab **3227** on the anvil **3224** is inserted in order to open the anvil **3224** as the elongated channel **3222** is moved axially in the proximal direction “PD” relative to the distal end portion **3209** of the shaft assembly **3208**. In various embodiments, a spring (not shown) may be employed to bias the anvil **3224** to the open position.

As indicated above, the surgical tool **3200** includes a tool mounting portion **3300** that includes a tool mounting plate **3302** that is configured to operably support the transmission arrangement **3305** and to mountably interface with the adaptor portion **1240'** which is coupled to the robotic system **1000** in the various manners described above. In at least one embodiment, the adaptor portion **1240'** may be identical to the adaptor portion **1240** described in detail above without the powered disc members employed by adapter **1240**. In other embodiments, the adaptor portion **1240'** may be identical to adaptor portion **1240**. However, in such embodiments, because the various components of the surgical end effector **3212** are all powered by motor(s) in the tool mounting portion **3300**, the surgical tool **3200** will not employ or require any of the mechanical (i.e., non-electrical) actuation motions from the tool holder portion **1270** to power the surgical end effector **3200** components. Still other modifications which are considered to be within the spirit and scope of the various forms of the present invention may employ one or more of the mechanical motions from the tool holder portion **1270** (as described hereinabove) to power/actuate one or more of the surgical end effector components while also employing one or more motors within the tool mounting portion to power one or more other components of the surgical end effector.

In various embodiments, the tool mounting plate **3302** is configured to support a first firing motor **3310** for supplying firing and retraction motions to the transmission arrangement **3305** to drive a knife bar **3335** that is coupled to a cutting instrument **3332** of the type described above. As can be seen in FIG. **58**, the tool mounting plate **3212** has an array of electrical connecting pins **3014** which are configured to interface with the slots **1258** (FIG. **25**) in the adapter **1240'**. Such arrangement permits the controller **1001** of the robotic system **1000** to provide control signals to the electronic control circuits **3320**, **3340** of the surgical tool **3200**. While the interface is described herein with reference to mechanical, electrical, and magnetic coupling elements, it should be understood that a wide variety of telemetry modalities might be used, including infrared, inductive coupling, or the like.

In one form or embodiment, the first control circuit **3320** includes a first power supply in the form of a first battery **3322** that is coupled to a first on-off solenoid powered switch **3324**. The first firing control circuit **3320** further includes a first on/off firing solenoid **3326** that is coupled to a first double pole switch **3328** for controlling the rotational direction of the first firing motor **3310**. Thus, when the robotic controller **1001** supplies an appropriate control signal, the first switch **3324** will permit the first battery **3322** to supply power to the first double pole switch **3328**. The robotic controller **1001** will also supply an appropriate signal to the first double pole switch **3328** to supply power to the first firing motor **3310**. When it is desired to fire the surgical end effector (i.e., drive the cutting instrument **3232** distally through tissue clamped in the surgical end effector **3212**, the first switch **3328** will be positioned in a first position by the robotic controller **1001**.

When it is desired to retract the cutting instrument **3232** to the starting position, the robotic controller **1001** will send the appropriate control signal to move the first switch **3328** to the second position.

Various embodiments of the surgical tool **3200** also employ a first gear box **3330** that is sized, in cooperation with a firing drive gear **3332** coupled thereto that operably interfaces with a firing gear train **3333**. In at least one non-limiting embodiment, the firing gear train **333** comprises a firing driven gear **3334** that is in meshing engagement with drive gear **3332**, for generating a desired amount of driving force necessary to drive the cutting instrument **3232** through tissue and to drive and form staples in the various manners described herein. In the embodiment depicted in FIG. **58**, the driven gear **3334** is coupled to a drive shaft **3335** that has a second driven gear **3336** coupled thereto. The second driven gear **3336** is supported in meshing engagement with a third driven gear **3337** that is in meshing engagement with a fourth driven gear **3338**. The fourth driven gear **3338** is in meshing engagement with a threaded proximal portion **3339** of the knife bar **3235** that is constrained to move axially. Thus, by rotating the drive shaft **3335** in a first direction, the cutting instrument **3232** is driven in the distal direction “DD” and rotating the drive shaft **3335** in an opposite second direction, the cutting instrument **3232** may be retracted in the proximal direction “PD”.

As indicated above, the opening and closing of the anvil **3224** is controlled by axially moving the elongated channel **3222** relative to the elongated shaft assembly **3208**. The axial movement of the elongated channel **3222** is controlled by a closure control system **3339**. In various embodiments, the closure control system **3339** includes a closure shaft **3340** which has a hollow threaded end portion **3341** that threadably engages a threaded closure rod **3342**. The threaded end portion **3341** is rotatably supported in a spine shaft **3343** that operably interfaces with the tool mounting portion **3300** and extends through a portion of the shaft assembly **3208** as shown. The closure system **3339** further comprises a closure control circuit **3350** that includes a second power supply in the form of a second battery **3352** that is coupled to a second on-off solenoid powered switch **3354**. Closure control circuit **3350** further includes a second on/off firing solenoid **3356** that is coupled to a second double pole switch **3358** for controlling the rotation of a second closure motor **3360**. Thus, when the robotic controller **1001** supplies an appropriate control signal, the second switch **3354** will permit the second battery **3352** to supply power to the second double pole switch **3354**. The robotic controller **1001** will also supply an appropriate signal to the second double pole switch **3358** to supply power to the second motor **3360**. When it is desired to close the anvil **3224**, the second switch **3348** will be in a first position. When it is desired to open the anvil **3224**, the second switch **3348** will be moved to a second position.

Various embodiments of tool mounting portion **3300** also employ a second gear box **3362** that is coupled to a closure drive gear **3364**. The closure drive gear **3364** is in meshing engagement with a closure gear train **3363**. In various non-limiting forms, the closure gear train **3363** includes a closure driven gear **3365** that is attached to a closure drive shaft **3366**. Also attached to the closure drive shaft **3366** is a closure drive gear **3367** that is in meshing engagement with a closure shaft gear **3360** attached to the closure shaft **3340**. FIG. **63** depicts the end effector **3212** in the open position. As indicated above, when the threaded closure rod **3342** is in the position depicted in FIG. **58**, a spring (not shown) biases the anvil **3224** to the open position. When it is desired to close the anvil **3224**, the robotic controller **1001** will activate the second motor **3360** to rotate the closure shaft **3340** to draw the threaded closure rod

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3342 and the channel 3222 in the proximal direction 'PD'. As the anvil 3224 contacts the distal end portion 3209 of the shaft 3208, the anvil 3224 is pivoted to the closed position.

A method of operating the surgical tool 3200 will now be described. Once the tool mounting portion 3302 has been operably coupled to the tool holder 1270 of the robotic system 1000, the robotic system 1000 can orient the end effector 3212 in position adjacent the target tissue to be cut and stapled. If the anvil 3224 is not already in the open position, the robotic controller 1001 may activate the second closure motor 3360 to drive the channel 3222 in the distal direction to the position depicted in FIG. 58. Once the robotic controller 1001 determines that the surgical end effector 3212 is in the open position by sensor(s) in the end effector and/or the tool mounting portion 3300, the robotic controller 1001 may provide the surgeon with a signal to inform the surgeon that the anvil 3224 may then be closed. Once the target tissue is positioned between the open anvil 3224 and the surgical staple cartridge 3234, the surgeon may then commence the closure process by activating the robotic controller 1001 to apply a closure control signal to the second closure motor 3360. The second closure motor 3360 applies a rotary motion to the closure shaft 3340 to draw the channel 3222 in the proximal direction "PD" until the anvil 3224 has been pivoted to the closed position. Once the robotic controller 1001 determines that the anvil 3224 has been moved to the closed position by sensor(s) in the surgical end effector 3212 and/or in the tool mounting portion 3300 that are in communication with the robotic control system, the motor 3360 may be deactivated. Thereafter, the firing process may be commenced either manually by the surgeon activating a trigger, button, etc. on the controller 1001 or the controller 1001 may automatically commence the firing process.

To commence the firing process, the robotic controller 1001 activates the firing motor 3310 to drive the firing bar 3235 and the cutting instrument 3232 in the distal direction "DD". Once robotic controller 1001 has determined that the cutting instrument 3232 has moved to the ending position within the surgical staple cartridge 3234 by means of sensors in the surgical end effector 3212 and/or the motor drive portion 3300, the robotic controller 1001 may provide the surgeon with an indication signal. Thereafter the surgeon may manually activate the first motor 3310 to retract the cutting instrument 3232 to the starting position or the robotic controller 1001 may automatically activate the first motor 3310 to retract the cutting element 3232.

The embodiment depicted in FIG. 58 does not include an articulation joint. FIGS. 64 and 65 illustrate surgical tools 3200' and 3200" that have end effectors 3212', 3212", respectively that may be employed with an elongated shaft embodiment that has an articulation joint of the various types disclosed herein. For example, as can be seen in FIG. 59, a threaded closure shaft 3342 is coupled to the proximal end 3223 of the elongated channel 3222 by a flexible cable or other flexible member 3345. The location of an articulation joint (not shown) within the elongated shaft assembly 3208 will coincide with the flexible member 3345 to enable the flexible member 3345 to accommodate such articulation. In addition, in the above-described embodiment, the flexible member 3345 is rotatably affixed to the proximal end portion 3223 of the elongated channel 3222 to enable the flexible member 3345 to rotate relative thereto to prevent the flexible member 3229 from "winding up" relative to the channel 3222. Although not shown, the cutting element may be driven in one of the above described manners by a knife bar that can also accommodate articulation of the elongated shaft assembly. FIG. 60 depicts a surgical end effector 3212" that is

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substantially identical to the surgical end effector 3212 described above, except that the threaded closure rod 3342 is attached to a closure nut 3347 that is constrained to only move axially within the elongated shaft assembly 3208. The flexible member 3345 is attached to the closure nut 3347. Such arrangement also prevents the threaded closure rod 3342 from winding-up the flexible member 3345. A flexible knife bar 3235' may be employed to facilitate articulation of the surgical end effector 3212".

The surgical tools 3200, 3200', and 3200" described above may also employ anyone of the cutting instrument embodiments described herein. As described above, the anvil of each of the end effectors of these tools is closed by drawing the elongated channel into contact with the distal end of the elongated shaft assembly. Thus, once the target tissue has been located between the staple cartridge 3234 and the anvil 3224, the robotic controller 1001 can start to draw the channel 3222 inward into the shaft assembly 3208. In various embodiments, however, to prevent the end effector 3212, 3212', 3212" from moving the target tissue with the end effector during this closing process, the controller 1001 may simultaneously move the tool holder and ultimately the tool such to compensate for the movement of the elongated channel 3222 so that, in effect, the target tissue is clamped between the anvil and the elongated channel without being otherwise moved.

FIGS. 61-63 depict another surgical tool embodiment 3201 that is substantially identical to surgical tool 3200" described above, except for the differences discussed below. In this embodiment, the threaded closure rod 3342' has variable pitched grooves. More specifically, as can be seen in FIG. 62, the closure rod 3342' has a distal groove section 3380 and a proximal groove section 3382. The distal and proximal groove sections 3380, 3382 are configured for engagement with a lug 3390 supported within the hollow threaded end portion 3341'. As can be seen in FIG. 62, the distal groove section 3380 has a finer pitch than the groove section 3382. Thus, such variable pitch arrangement permits the elongated channel 3222 to be drawn into the shaft 3208 at a first speed or rate by virtue of the engagement between the lug 3390 and the proximal groove segment 3382. When the lug 3390 engages the distal groove segment, the channel 3222 will be drawn into the shaft 3208 at a second speed or rate. Because the proximal groove segment 3382 is coarser than the distal groove segment 3380, the first speed will be greater than the second speed. Such arrangement serves to speed up the initial closing of the end effector for tissue manipulation and then after the tissue has been properly positioned therein, generate the amount of closure forces to properly clamp the tissue for cutting and sealing. Thus, the anvil 3234 initially closes fast with a lower force and then applies a higher closing force as the anvil closes more slowly.

The surgical end effector opening and closing motions are employed to enable the user to use the end effector to grasp and manipulate tissue prior to fully clamping it in the desired location for cutting and sealing. The user may, for example, open and close the surgical end effector numerous times during this process to orient the end effector in a proper position which enables the tissue to be held in a desired location. Thus, in at least some embodiments, to produce the high loading for firing, the fine thread may require as many as 5-10 full rotations to generate the necessary load. In some cases, for example, this action could take as long as 2-5 seconds. If it also took an equally long time to open and close the end effector each time during the positioning/tissue manipulation process, just positioning the end effector may take an undesirably long time. If that happens, it is possible that a user may abandon such use of the end effector for use of

a conventional grasper device. Use of graspers, etc. may undesirably increase the costs associated with completing the surgical procedure.

The above-described embodiments employ a battery or batteries to power the motors used to drive the end effector components. Activation of the motors is controlled by the robotic system 1000. In alternative embodiments, the power supply may comprise alternating current "AC" that is supplied to the motors by the robotic system 1000. That is, the AC power would be supplied from the system powering the robotic system 1000 through the tool holder and adapter. In still other embodiments, a power cord or tether may be attached to the tool mounting portion 3300 to supply the requisite power from a separate source of alternating or direct current.

In use, the controller 1001 may apply an initial rotary motion to the closure shaft 3340 (FIG. 58) to draw the elongated channel 3222 axially inwardly into the elongated shaft assembly 3208 and move the anvil from a first position to an intermediate position at a first rate that corresponds with the point wherein the distal groove section 3380 transitions to the proximal groove section 3382. Further application of rotary motion to the closure shaft 3340 will cause the anvil to move from the intermediate position to the closed position relative to the surgical staple cartridge. When in the closed position, the tissue to be cut and stapled is properly clamped between the anvil and the surgical staple cartridge.

FIGS. 64-68 illustrate another surgical tool embodiment 3400 of the present invention. This embodiment includes an elongated shaft assembly 3408 that extends from a tool mounting portion 3500. The elongated shaft assembly 3408 includes a rotatable proximal closure tube segment 3410 that is rotatably journaled on a proximal spine member 3420 that is rigidly coupled to a tool mounting plate 3502 of the tool mounting portion 3500. The proximal spine member 3420 has a distal end 3422 that is coupled to an elongated channel portion 3522 of a surgical end effector 3412. For example, in at least one embodiment, the elongated channel portion 3522 has a distal end portion 3523 that "hookingly engages" the distal end 3422 of the spine member 3420. The elongated channel 3522 is configured to support a surgical staple cartridge 3534 therein. This embodiment may employ one of the various cutting instrument embodiments disclosed herein to sever tissue that is clamped in the surgical end effector 3412 and fire the staples in the staple cartridge 3534 into the severed tissue.

Surgical end effector 3412 has an anvil 3524 that is pivotally coupled to the elongated channel 3522 by a pair of trunnions 3525 that are received in corresponding openings 3529 in the elongated channel 3522. The anvil 3524 is moved between the open (FIG. 64) and closed positions (FIGS. 65-67) by a distal closure tube segment 3430. A distal end portion 3432 of the distal closure tube segment 3430 includes an opening 3445 into which a tab 3527 on the anvil 3524 is inserted in order to open and close the anvil 3524 as the distal closure tube segment 3430 moves axially relative thereto. In various embodiments, the opening 3445 is shaped such that as the closure tube segment 3430 is moved in the proximal direction, the closure tube segment 3430 causes the anvil 3524 to pivot to an open position. In addition or in the alternative, a spring (not shown) may be employed to bias the anvil 3524 to the open position.

As can be seen in FIGS. 64-67, the distal closure tube segment 3430 includes a lug 3442 that extends from its distal end 3440 into threaded engagement with a variable pitch groove/thread 3414 formed in the distal end 3412 of the rotatable proximal closure tube segment 3410. The variable

pitch groove/thread 3414 has a distal section 3416 and a proximal section 3418. The pitch of the distal groove/thread section 3416 is finer than the pitch of the proximal groove/thread section 3418. As can also be seen in FIGS. 64-67, the distal closure tube segment 3430 is constrained for axial movement relative to the spine member 3420 by an axial retainer pin 3450 that is received in an axial slot 3424 in the distal end of the spine member 3420.

As indicated above, the anvil 2524 is open and closed by rotating the proximal closure tube segment 3410. The variable pitch thread arrangement permits the distal closure tube segment 3430 to be driven in the distal direction "DD" at a first speed or rate by virtue of the engagement between the lug 3442 and the proximal groove/thread section 3418. When the lug 3442 engages the distal groove/thread section 3416, the distal closure tube segment 3430 will be driven in the distal direction at a second speed or rate. Because the proximal groove/thread section 3418 is coarser than the distal groove/thread segment 3416, the first speed will be greater than the second speed.

In at least one embodiment, the tool mounting portion 3500 is configured to receive a corresponding first rotary motion from the robotic controller 1001 and convert that first rotary motion to a primary rotary motion for rotating the rotatable proximal closure tube segment 3410 about a longitudinal tool axis LT-LT. As can be seen in FIG. 68, a proximal end 3460 of the proximal closure tube segment 3410 is rotatably supported within a cradle arrangement 3504 attached to a tool mounting plate 3502 of the tool mounting portion 3500. A rotation gear 3462 is formed on or attached to the proximal end 3460 of the closure tube segment 3410 for meshing engagement with a rotation drive assembly 3470 that is operably supported on the tool mounting plate 3502. In at least one embodiment, a rotation drive gear 3472 is coupled to a corresponding first one of the driven discs or elements 1304 on the adapter side of the tool mounting plate 3502 when the tool mounting portion 3500 is coupled to the tool holder 1270. See FIGS. 26 and 68. The rotation drive assembly 3470 further comprises a rotary driven gear 3474 that is rotatably supported on the tool mounting plate 3502 in meshing engagement with the rotation gear 3462 and the rotation drive gear 3472. Application of a first rotary control motion from the robotic controller 1001 through the tool holder 1270 and the adapter 1240 to the corresponding driven element 1304 will thereby cause rotation of the rotation drive gear 3472 by virtue of being operably coupled thereto. Rotation of the rotation drive gear 3472 ultimately results in the rotation of the closure tube segment 3410 to open and close the anvil 3524 as described above.

As indicated above, the surgical end effector 3412 employs a cutting instrument of the type and constructions described above. FIG. 68 illustrates one form of knife drive assembly 3480 for axially advancing a knife bar 3492 that is attached to such cutting instrument. One form of the knife drive assembly 3480 comprises a rotary drive gear 3482 that is coupled to a corresponding third one of the driven discs or elements 1304 on the adapter side of the tool mounting plate 3502 when the tool drive portion 3500 is coupled to the tool holder 1270. See FIGS. 26 and 68. The knife drive assembly 3480 further comprises a first rotary driven gear assembly 3484 that is rotatably supported on the tool mounting plate 5200. The first rotary driven gear assembly 3484 is in meshing engagement with a third rotary driven gear assembly 3486 that is rotatably supported on the tool mounting plate 3502 and which is in meshing engagement with a fourth rotary driven gear assembly 3488 that is in meshing engagement with a threaded portion 3494 of drive shaft assembly 3490 that is coupled to

the knife bar **3492**. Rotation of the rotary drive gear **3482** in a second rotary direction will result in the axial advancement of the drive shaft assembly **3490** and knife bar **3492** in the distal direction "DD". Conversely, rotation of the rotary drive gear **3482** in a secondary rotary direction (opposite to the second rotary direction) will cause the drive shaft assembly **3490** and the knife bar **3492** to move in the proximal direction.

FIGS. **69-78** illustrate another surgical tool **3600** embodiment of the present invention that may be employed in connection with a robotic system **1000**. As can be seen in FIG. **69**, the tool **3600** includes an end effector in the form of a disposable loading unit **3612**. Various forms of disposable loading units that may be employed in connection with tool **3600** are disclosed, for example, in U.S. Patent Application Publication No. US 2009/0206131 A1, entitled "End Effector Arrangements For a Surgical Cutting and Stapling Instrument", the disclosure of which is herein incorporated by reference in its entirety.

In at least one form, the disposable loading unit **3612** includes an anvil assembly **3620** that is supported for pivotal travel relative to a carrier **3630** that operably supports a staple cartridge **3640** therein. A mounting assembly **3650** is pivotally coupled to the cartridge carrier **3630** to enable the carrier **3630** to pivot about an articulation axis AA-AA relative to a longitudinal tool axis LT-LT. Referring to FIG. **74**, mounting assembly **3650** includes upper and lower mounting portions **3652** and **3654**. Each mounting portion includes a threaded bore **3656** on each side thereof dimensioned to receive threaded bolts (not shown) for securing the proximal end of carrier **3630** thereto. A pair of centrally located pivot members **3658** extends between upper and lower mounting portions via a pair of coupling members **3660** which engage a distal end of a housing portion **3662**. Coupling members **3660** each include an interlocking proximal portion **3664** configured to be received in grooves **3666** formed in the proximal end of housing portion **3662** to retain mounting assembly **3650** and housing portion **3662** in a longitudinally fixed position in relation thereto.

In various forms, housing portion **3662** of disposable loading unit **3614** includes an upper housing half **3670** and a lower housing half **3672** contained within an outer casing **3674**. The proximal end of housing half **3670** includes engagement nubs **3676** for releasably engaging an elongated shaft **3700** and an insertion tip **3678**. Nubs **3676** form a bayonet-type coupling with the distal end of the elongated shaft **3700** which will be discussed in further detail below. Housing halves **3670**, **3672** define a channel **3674** for slidably receiving axial drive assembly **3680**. A second articulation link **3690** is dimensioned to be slidably positioned within a slot **3679** formed between housing halves **3670**, **3672**. A pair of blow out plates **3691** are positioned adjacent the distal end of housing portion **3662** adjacent the distal end of axial drive assembly **3680** to prevent outward bulging of drive assembly **3680** during articulation of carrier **3630**.

In various embodiments, the second articulation link **3690** includes at least one elongated metallic plate. Preferably, two or more metallic plates are stacked to form link **3690**. The proximal end of articulation link **3690** includes a hook portion **3692** configured to engage first articulation link **3710** extending through the elongated shaft **3700**. The distal end of the second articulation link **3690** includes a loop **3694** dimensioned to engage a projection formed on mounting assembly **3650**. The projection is laterally offset from pivot pin **3658** such that linear movement of second articulation link **3690** causes mounting assembly **3650** to pivot about pivot pins **3658** to articulate the carrier **3630**.

In various forms, axial drive assembly **3680** includes an elongated drive beam **3682** including a distal working head **3684** and a proximal engagement section **3685**. Drive beam **3682** may be constructed from a single sheet of material or, preferably, multiple stacked sheets. Engagement section **3685** includes a pair of engagement fingers which are dimensioned and configured to mountingly engage a pair of corresponding retention slots formed in drive member **3686**. Drive member **3686** includes a proximal porthole **3687** configured to receive the distal end **3722** of control rod **2720** (See FIG. **78**) when the proximal end of disposable loading unit **3614** is engaged with elongated shaft **3700** of surgical tool **3600**.

Referring to FIGS. **69** and **76-78**, to use the surgical tool **3600**, a disposable loading unit **3612** is first secured to the distal end of elongated shaft **3700**. It will be appreciated that the surgical tool **3600** may include an articulating or a non-articulating disposable loading unit. To secure the disposable loading unit **3612** to the elongated shaft **3700**, the distal end **3722** of control rod **3720** is inserted into insertion tip **3678** of disposable loading unit **3612**, and insertion tip **3678** is slid longitudinally into the distal end of the elongated shaft **3700** in the direction indicated by arrow "A" in FIG. **76** such that hook portion **3692** of second articulation link **3690** slides within a channel **3702** in the elongated shaft **3700**. Nubs **3676** will each be aligned in a respective channel (not shown) in elongated shaft **3700**. When hook portion **3692** engages the proximal wall **3704** of channel **3702**, disposable loading unit **3612** is rotated in the direction indicated by arrow "B" in FIGS. **75** and **78** to move hook portion **3692** of second articulation link **3690** into engagement with finger **3712** of first articulation link **3710**. Nubs **3676** also form a "bayonet-type" coupling within annular channel **3703** in the elongated shaft **3700**. During rotation of loading unit **3612**, nubs **3676** engage cam surface **3732** (FIG. **76**) of block plate **3730** to initially move plate **3730** in the direction indicated by arrow "C" in FIG. **81** to lock engagement member **3734** in recess **3721** of control rod **3720** to prevent longitudinal movement of control rod **3720** during attachment of disposable loading unit **3612**. During the final degree of rotation, nubs **3676** disengage from cam surface **3732** to allow blocking plate **3730** to move in the direction indicated by arrow "D" in FIGS. **75** and **78** from behind engagement member **3734** to once again permit longitudinal movement of control rod **3720**. While the above-described attachment method reflects that the disposable loading unit **3612** is manipulated relative to the elongated shaft **3700**, the person of ordinary skill in the art will appreciate that the disposable loading unit **3612** may be supported in a stationary position and the robotic system **1000** may manipulate the elongated shaft portion **3700** relative to the disposable loading unit **3612** to accomplish the above-described coupling procedure.

FIG. **79** illustrates another disposable loading unit **3612'** that is attachable in a bayonet-type arrangement with the elongated shaft **3700'** that is substantially identical to shaft **3700** except for the differences discussed below. As can be seen in FIG. **79**, the elongated shaft **3700'** has slots **3705** that extend for at least a portion thereof and which are configured to receive nubs **3676** therein. In various embodiments, the disposable loading unit **3612'** includes arms **3677** extending therefrom which, prior to the rotation of disposable loading unit **3612'**, can be aligned, or at least substantially aligned, with nubs **3676** extending from housing portion **3662**. In at least one embodiment, arms **3677** and nubs **3676** can be inserted into slots **3705** in elongated shaft **3700'**, for example, when disposable loading unit **3612'** is inserted into elongated shaft **3700'**. When disposable loading unit **3612'** is rotated, arms **3677** can be sufficiently confined within slots **3705** such

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that slots **3705** can hold them in position, whereas nubs **3676** can be positioned such that they are not confined within slots **3705** and can be rotated relative to arms **3677**. When rotated, the hook portion **3692** of the articulation link **3690** is engaged with the first articulation link **3710** extending through the elongated shaft **3700**.

Other methods of coupling the disposable loading units to the end of the elongated shaft may be employed. For example, as shown in FIGS. **80** and **81**, disposable loading unit **3612** can include connector portion **3613** which can be configured to be engaged with connector portion **3740** of the elongated shaft **3700**. In at least one embodiment, connector portion **3613** can include at least one projection and/or groove which can be mated with at least one projection and/or groove of connector portion **3740**. In at least one such embodiment, the connector portions can include co-operating dovetail portions. In various embodiments, the connector portions can be configured to interlock with one another and prevent, or at least inhibit, distal and/or proximal movement of disposable loading unit **3612** along axis **3741**. In at least one embodiment, the distal end of the axial drive assembly **3680** can include aperture **3681** which can be configured to receive projection **3721** extending from control rod **3720**. In various embodiments, such an arrangement can allow disposable loading unit **3612** to be assembled to elongated shaft **3700** in a direction which is not collinear with or parallel to axis **3741**. Although not illustrated, axial drive assembly **3680** and control rod **3720** can include any other suitable arrangement of projections and apertures to operably connect them to each other. Also in this embodiment, the first articulation link **3710** which can be operably engaged with second articulation link **3690**.

As can be seen in FIGS. **69** and **82**, the surgical tool **3600** includes a tool mounting portion **3750**. The tool mounting portion **3750** includes a tool mounting plate **3751** that is configured for attachment to the tool drive assembly **1010**. The tool mounting portion operably supported a transmission arrangement **3752** thereon. In use, it may be desirable to rotate the disposable loading unit **3612** about the longitudinal tool axis defined by the elongated shaft **3700**. In at least one embodiment, the transmission arrangement **3752** includes a rotational transmission assembly **3753** that is configured to receive a corresponding rotary output motion from the tool drive assembly **1010** of the robotic system **1000** and convert that rotary output motion to a rotary control motion for rotating the elongated shaft **3700** (and the disposable loading unit **3612**) about the longitudinal tool axis LT-LT. As can be seen in FIG. **82**, a proximal end **3701** of the elongated shaft **3700** is rotatably supported within a cradle arrangement **3754** that is attached to the tool mounting plate **3751** of the tool mounting portion **3750**. A rotation gear **3755** is formed on or attached to the proximal end **3701** of the elongated shaft **3700** for meshing engagement with a rotation gear assembly **3756** operably supported on the tool mounting plate **3751**. In at least one embodiment, a rotation drive gear **3757** drivingly coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **3751** when the tool mounting portion **3750** is coupled to the tool drive assembly **1010**. The rotation transmission assembly **3753** further comprises a rotary driven gear **3758** that is rotatably supported on the tool mounting plate **3751** in meshing engagement with the rotation gear **3755** and the rotation drive gear **3757**. Application of a first rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **3757** by virtue of being operably coupled thereto. Rotation of the rotation drive

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gear **3757** ultimately results in the rotation of the elongated shaft **3700** (and the disposable loading unit **3612**) about the longitudinal tool axis LT-LT (primary rotary motion).

As can be seen in FIG. **82**, a drive shaft assembly **3760** is coupled to a proximal end of the control rod **2720**. In various embodiments, the control rod **2720** is axially advanced in the distal and proximal directions by a knife/closure drive transmission **3762**. One form of the knife/closure drive assembly **3762** comprises a rotary drive gear **3763** that is coupled to a corresponding second one of the driven rotatable body portions, discs or elements **1304** on the adapter side of the tool mounting plate **3751** when the tool mounting portion **3750** is coupled to the tool holder **1270**. The rotary driven gear **3763** is in meshing driving engagement with a gear train, generally depicted as **3764**. In at least one form, the gear train **3764** further comprises a first rotary driven gear assembly **3765** that is rotatably supported on the tool mounting plate **3751**. The first rotary driven gear assembly **3765** is in meshing engagement with a second rotary driven gear assembly **3766** that is rotatably supported on the tool mounting plate **3751** and which is in meshing engagement with a third rotary driven gear assembly **3767** that is in meshing engagement with a threaded portion **3768** of the drive shaft assembly **3760**. Rotation of the rotary drive gear **3763** in a second rotary direction will result in the axial advancement of the drive shaft assembly **3760** and control rod **2720** in the distal direction "DD". Conversely, rotation of the rotary drive gear **3763** in a secondary rotary direction which is opposite to the second rotary direction will cause the drive shaft assembly **3760** and the control rod **2720** to move in the proximal direction. When the control rod **2720** moves in the distal direction, it drives the drive beam **3682** and the working head **3684** thereof distally through the surgical staple cartridge **3640**. As the working head **3684** is driven distally, it operably engages the anvil **3620** to pivot it to a closed position.

The cartridge carrier **3630** may be selectively articulated about articulation axis AA-AA by applying axial articulation control motions to the first and second articulation links **3710** and **3690**. In various embodiments, the transmission arrangement **3752** further includes an articulation drive **3770** that is operably supported on the tool mounting plate **3751**. More specifically and with reference to FIG. **82**, it can be seen that a proximal end portion **3772** of an articulation drive shaft **3771** configured to operably engage with the first articulation link **3710** extends through the rotation gear **3755** and is rotatably coupled to a shifter rack gear **3774** that is slidably affixed to the tool mounting plate **3751** through slots **3775**. The articulation drive **3770** further comprises a shifter drive gear **3776** that is coupled to a corresponding third one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **3751** when the tool mounting portion **3750** is coupled to the tool holder **1270**. The articulation drive assembly **3770** further comprises a shifter driven gear **3778** that is rotatably supported on the tool mounting plate **3751** in meshing engagement with the shifter drive gear **3776** and the shifter rack gear **3774**. Application of a third rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding driven element **1304** will thereby cause rotation of the shifter drive gear **3776** by virtue of being operably coupled thereto. Rotation of the shifter drive gear **3776** ultimately results in the axial movement of the shifter gear rack **3774** and the articulation drive shaft **3771**. The direction of axial travel of the articulation drive shaft **3771** depends upon the direction in which the shifter drive gear **3776** is rotated by the robotic system **1000**. Thus, rotation of the shifter drive gear **3776** in a first rotary direction will result in the axial movement of the articulation drive shaft

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3771 in the proximal direction “PD” and cause the cartridge carrier **3630** to pivot in a first direction about articulation axis AA-AA. Conversely, rotation of the shifter drive gear **3776** in a second rotary direction (opposite to the first rotary direction) will result in the axial movement of the articulation drive shaft **3771** in the distal direction “DD” to thereby cause the cartridge carrier **3630** to pivot about articulation axis AA-AA in an opposite direction.

FIG. **83** illustrates yet another surgical tool **3800** embodiment of the present invention that may be employed with a robotic system **1000**. As can be seen in FIG. **83**, the surgical tool **3800** includes a surgical end effector **3812** in the form of an endocutter **3814** that employs various cable-driven components. Various forms of cable driven endocutters are disclosed, for example, in U.S. Pat. No. 7,726,537, entitled “Surgical Stapler With Universal Articulation and Tissue Pre-Clamp” and U.S. Patent Application Publication No. US 2008/0308603A1, entitled “Cable Driven Surgical Stapling and Cutting Instrument With Improved Cable Attachment Arrangements”, the disclosures of each are herein incorporated by reference in their respective entireties. Such endocutters **3814** may be referred to as a “disposable loading unit” because they are designed to be disposed of after a single use. However, the various unique and novel arrangements of various embodiments of the present invention may also be employed in connection with cable driven end effectors that are reusable.

As can be seen in FIG. **83**, in at least one form, the endocutter **3814** includes an elongated channel **3822** that operably supports a surgical staple cartridge **3834** therein. An anvil **3824** is pivotally supported for movement relative to the surgical staple cartridge **3834**. The anvil **3824** has a cam surface **3825** that is configured for interaction with a pre-clamping collar **3840** that is supported for axial movement relative thereto. The end effector **3814** is coupled to an elongated shaft assembly **3808** that is attached to a tool mounting portion **3900**. In various embodiments, a closure cable **3850** is employed to move pre-clamping collar **3840** distally onto and over cam surface **3825** to close the anvil **3824** relative to the surgical staple cartridge **3834** and compress the tissue therebetween. Preferably, closure cable **3850** attaches to the pre-clamping collar **3840** at or near point **3841** and is fed through a passageway in anvil **3824** (or under a proximal portion of anvil **3824**) and fed proximally through shaft **3808**. Actuation of closure cable **3850** in the proximal direction “PD” forces pre-clamping collar **3840** distally against cam surface **3825** to close anvil **3824** relative to staple cartridge assembly **3834**. A return mechanism, e.g., a spring, cable system or the like, may be employed to return pre-clamping collar **3840** to a pre-clamping orientation which re-opens the anvil **3824**.

The elongated shaft assembly **3808** may be cylindrical in shape and define a channel **3811** which may be dimensioned to receive a tube adapter **3870**. See FIG. **84**. In various embodiments, the tube adapter **3870** may be slidably received in friction-fit engagement with the internal channel of elongated shaft **3808**. The outer surface of the tube adapter **3870** may further include at least one mechanical interface, e.g., a cutout or notch **3871**, oriented to mate with a corresponding mechanical interface, e.g., a radially inwardly extending protrusion or detent (not shown), disposed on the inner periphery of internal channel **3811** to lock the tube adapter **3870** to the elongated shaft **3808**. In various embodiments, the distal end of tube adapter **3870** may include a pair of opposing flanges **3872a** and **3872b** which define a cavity for pivotably receiving a pivot block **3873** therein. Each flange **3872a** and **3872b** may include an aperture **3874a** and **3874b** that is oriented to receive a pivot pin **3875** that extends

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through an aperture in pivot block **3873** to allow pivotable movement of pivot block **3873** about an axis that is perpendicular to longitudinal tool axis “LT-LT”. The channel **3822** may be formed with two upwardly extending flanges **3823a**, **3823b** that have apertures therein, which are dimensioned to receive a pivot pin **3827**. In turn, pivot pin **3875** mounts through apertures in pivot block **3873** to permit rotation of the surgical end effector **3814** about the “Y” axis as needed during a given surgical procedure. Rotation of pivot block **3873** about pin **3875** along “Z” axis rotates the surgical end effector **3814** about the “Z” axis. See FIG. **84**. Other methods of fastening the elongated channel **3822** to the pivot block **3873** may be effectively employed without departing from the spirit and scope of the present invention.

The surgical staple cartridge **3834** can be assembled and mounted within the elongated channel **3822** during the manufacturing or assembly process and sold as part of the surgical end effector **3812**, or the surgical staple cartridge **3834** may be designed for selective mounting within the elongated channel **3822** as needed and sold separately, e.g., as a single use replacement, replaceable or disposable staple cartridge assembly. It is within the scope of this disclosure that the surgical end effector **3812** may be pivotally, operatively, or integrally attached, for example, to distal end **3809** of the elongated shaft assembly **3808** of a disposable surgical stapler. As is known, a used or spent disposable loading unit **3814** can be removed from the elongated shaft assembly **3808** and replaced with an unused disposable unit. The endocutter **3814** may also preferably include an actuator, preferably a dynamic clamping member **3860**, a sled **3862**, as well as staple pushers (not shown) and staples (not shown) once an unspent or unused cartridge **3834** is mounted in the elongated channel **3822**. See FIG. **84**.

In various embodiments, the dynamic clamping member **3860** is associated with, e.g., mounted on and rides on, or with or is connected to or integral with and/or rides behind sled **3862**. It is envisioned that dynamic clamping member **3860** can have cam wedges or cam surfaces attached or integrally formed or be pushed by a leading distal surface thereof. In various embodiments, dynamic clamping member **3860** may include an upper portion **3863** having a transverse aperture **3864** with a pin **3865** mountable or mounted therein, a central support or upward extension **3866** and substantially T-shaped bottom flange **3867** which cooperate to slidably retain dynamic clamping member **3860** along an ideal cutting path during longitudinal, distal movement of sled **3862**. The leading cutting edge **3868**, here, knife blade **3869**, is dimensioned to ride within slot **3835** of staple cartridge assembly **3834** and separate tissue once stapled. As used herein, the term “knife assembly” may include the aforementioned dynamic clamping member **3860**, knife **3869**, and sled **3862** or other knife/beam/sled drive arrangements and cutting instrument arrangements. In addition, the various embodiments of the present invention may be employed with knife assembly/cutting instrument arrangements that may be entirely supported in the staple cartridge **3834** or partially supported in the staple cartridge **3834** and elongated channel **3822** or entirely supported within the elongated channel **3822**.

In various embodiments, the dynamic clamping member **3860** may be driven in the proximal and distal directions by a cable drive assembly **3870**. In one non-limiting form, the cable drive assembly comprises a pair of advance cables **3880**, **3882** and a firing cable **3884**. FIGS. **85** and **86** illustrate the cables **3880**, **3882**, **3884** in diagrammatic form. As can be seen in those Figures, a first advance cable **3880** is operably supported on a first distal cable transition support **3885** which may comprise, for example, a pulley, rod, capstan, etc. that is

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attached to the distal end of the elongated channel **3822** and a first proximal cable transition support **3886** which may comprise, for example, a pulley, rod, capstan, etc. that is operably supported by the elongated channel **3822**. A distal end **3881** of the first advance cable **3880** is affixed to the dynamic clamping assembly **3860**. The second advance cable **3882** is operably supported on a second distal cable transition support **3887** which may, for example, comprise a pulley, rod, capstan etc. that is mounted to the distal end of the elongated channel **3822** and a second proximal cable transition support **3888** which may, for example, comprise a pulley, rod, capstan, etc. mounted to the proximal end of the elongated channel **3822**. The proximal end **3883** of the second advance cable **3882** may be attached to the dynamic clamping assembly **3860**. Also in these embodiments, an endless firing cable **3884** is employed and journaled on a support **3889** that may comprise a pulley, rod, capstan, etc. mounted within the elongated shaft **3808**. In one embodiment, the retract cable **3884** may be formed in a loop and coupled to a connector **3889'** that is fixedly attached to the first and second advance cables **3880**, **3882**.

Various non-limiting embodiments of the present invention include a cable drive transmission **3920** that is operably supported on a tool mounting plate **3902** of the tool mounting portion **3900**. The tool mounting portion **3900** has an array of electrical connecting pins **3904** which are configured to interface with the slots **1258** (FIG. 25) in the adapter **1240'**. Such arrangement permits the robotic system **1000** to provide control signals to a control circuit **3910** of the tool **3800**. While the interface is described herein with reference to mechanical, electrical, and magnetic coupling elements, it should be understood that a wide variety of telemetry modalities might be used, including infrared, inductive coupling, or the like.

Control circuit **3910** is shown in schematic form in FIG. 83. In one form or embodiment, the control circuit **3910** includes a power supply in the form of a battery **3912** that is coupled to an on-off solenoid powered switch **3914**. In other embodiments, however, the power supply may comprise a source of alternating current. Control circuit **3910** further includes an on/off solenoid **3916** that is coupled to a double pole switch **3918** for controlling motor rotation direction. Thus, when the robotic system **1000** supplies an appropriate control signal, switch **3914** will permit battery **3912** to supply power to the double pole switch **3918**. The robotic system **1000** will also supply an appropriate signal to the double pole switch **3918** to supply power to a shifter motor **3922**.

Turning to FIGS. 87-92, at least one embodiment of the cable drive transmission **3920** comprises a drive pulley **3930** that is operably mounted to a drive shaft **3932** that is attached to a driven element **1304** of the type and construction described above that is designed to interface with a corresponding drive element **1250** of the adapter **1240**. See FIGS. 25 and 90. Thus, when the tool mounting portion **3900** is operably coupled to the tool holder **1270**, the robot system **1000** can apply rotary motion to the drive pulley **3930** in a desired direction. A first drive member or belt **3934** drivingly engages the drive pulley **3930** and a second drive shaft **3936** that is rotatably supported on a shifter yoke **3940**. The shifter yoke **3940** is operably coupled to the shifter motor **3922** such that rotation of the shaft **3923** of the shifter motor **3922** in a first direction will shift the shifter yoke in a first direction "FD" and rotation of the shifter motor shaft **3923** in a second direction will shift the shifter yoke **3940** in a second direction "SD". Other embodiments of the present invention may employ a shifter solenoid arrangement for shifting the shifter yoke in said first and second directions.

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As can be seen in FIGS. 87-90, a closure drive gear **3950** mounted to a second drive shaft **3936** and is configured to selectively mesh with a closure drive assembly, generally designated as **3951**. Likewise a firing drive gear **3960** is also mounted to the second drive shaft **3936** and is configured to selectively mesh with a firing drive assembly generally designated as **3961**. Rotation of the second drive shaft **3936** causes the closure drive gear **3950** and the firing drive gear **3960** to rotate. In one non-limiting embodiment, the closure drive assembly **3951** comprises a closure driven gear **3952** that is coupled to a first closure pulley **3954** that is rotatably supported on a third drive shaft **3956**. The closure cable **3850** is drivingly received on the first closure pulley **3954** such that rotation of the closure driven gear **3952** will drive the closure cable **3850**. Likewise, the firing drive assembly **3961** comprises a firing driven gear **3962** that is coupled to a first firing pulley **3964** that is rotatably supported on the third drive shaft **3956**. The first and second driving pulleys **3954** and **3964** are independently rotatable on the third drive shaft **3956**. The firing cable **3884** is drivingly received on the first firing pulley **3964** such that rotation of the firing driven gear **3962** will drive the firing cable **3884**.

Also in various embodiments, the cable drive transmission **3920** further includes a braking assembly **3970**. In at least one embodiment, for example, the braking assembly **3970** includes a closure brake **3972** that comprises a spring arm **3973** that is attached to a portion of the transmission housing **3971**. The closure brake **3972** has a gear lug **3974** that is sized to engage the teeth of the closure driven gear **3952** as will be discussed in further detail below. The braking assembly **3970** further includes a firing brake **3976** that comprises a spring arm **3977** that is attached to another portion of the transmission housing **3971**. The firing brake **3976** has a gear lug **3978** that is sized to engage the teeth of the firing driven gear **3962**.

At least one embodiment of the surgical tool **3800** may be used as follows. The tool mounting portion **3900** is operably coupled to the interface **1240** of the robotic system **1000**. The controller or control unit of the robotic system is operated to locate the tissue to be cut and stapled between the open anvil **3824** and the staple cartridge **3834**. When in that initial position, the braking assembly **3970** has locked the closure driven gear **3952** and the firing driven gear **3962** such that they cannot rotate. That is, as shown in FIG. 88, the gear lug **3974** is in locking engagement with the closure driven gear **3952** and the gear lug **3978** is in locking engagement with the firing driven gear **3962**. Once the surgical end effector **3814** has been properly located, the controller **1001** of the robotic system **1000** will provide a control signal to the shifter motor **3922** (or shifter solenoid) to move the shifter yoke **3940** in the first direction. As the shifter yoke **3940** is moved in the first direction, the closure drive gear **3950** moves the gear lug **3974** out of engagement with the closure driven gear **3952** as it moves into meshing engagement with the closure driven gear **3952**. As can be seen in FIG. 87, when in that position, the gear lug **3978** remains in locking engagement with the firing driven gear **3962** to prevent actuation of the firing system. Thereafter, the robotic controller **1001** provides a first rotary actuation motion to the drive pulley **3930** through the interface between the driven element **1304** and the corresponding components of the tool holder **1240**. As the drive pulley **3930** is rotated in the first direction, the closure cable **3850** is rotated to drive the preclamping collar **3840** into closing engagement with the cam surface **3825** of the anvil **3824** to move it to the closed position thereby clamping the target tissue between the anvil **3824** and the staple cartridge **3834**. See FIG. 83. Once the anvil **3824** has been moved to the closed position, the robotic controller **1001** stops the application of the first rotary motion to the drive pulley **3930**.

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Thereafter, the robotic controller **1001** may commence the firing process by sending another control signal to the shifter motor **3922** (or shifter solenoid) to cause the shifter yoke to move in the second direction “SD” as shown in FIG. **94**. As the shifter yoke **3940** is moved in the second direction, the firing drive gear **3960** moves the gear lug **3978** out of engagement with the firing driven gear **3962** as it moves into meshing engagement with the firing driven gear **3962**. As can be seen in FIG. **89**, when in that position, the gear lug **3974** remains in locking engagement with the closure driven gear **3952** to prevent actuation of the closure system. Thereafter, the robotic controller **1001** is activated to provide the first rotary actuation motion to the drive pulley **3930** through the interface between the driven element **1304** and the corresponding components of the tool holder **1240**. As the drive pulley **3930** is rotated in the first direction, the firing cable **3884** is rotated to drive the dynamic clamping member **3860** in the distal direction “DD” thereby firing the staples and cutting the tissue clamped in the end effector **3814**. Once the robotic system **1000** determines that the dynamic clamping member **3860** has reached its distal most position—either through sensors or through monitoring the amount of rotary input applied to the drive pulley **3930**, the controller **1001** may then apply a second rotary motion to the drive pulley **3930** to rotate the closure cable **3850** in an opposite direction to cause the dynamic clamping member **3860** to be retracted in the proximal direction “PD”. Once the dynamic clamping member has been retracted to the starting position, the application of the second rotary motion to the drive pulley **3930** is discontinued. Thereafter, the shifter motor **3922** (or shifter solenoid) is powered to move the shifter yoke **3940** to the closure position (FIG. **92**). Once the closure drive gear **3950** is in meshing engagement with the closure driven gear **3952**, the robotic controller **1001** may once again apply the second rotary motion to the drive pulley **3930**. Rotation of the drive pulley **3930** in the second direction causes the closure cable **3850** to retract the preclamping collar **3840** out of engagement with the cam surface **3825** of the anvil **3824** to permit the anvil **3824** to move to an open position (by a spring or other means) to release the stapled tissue from the surgical end effector **3814**.

FIG. **93** illustrates a surgical tool **4000** that employs a gear driven firing bar **4092** as shown in FIGS. **94-96**. This embodiment includes an elongated shaft assembly **4008** that extends from a tool mounting portion **4100**. The tool mounting portion **4100** includes a tool mounting plate **4102** that operable supports a transmission arrangement **4103** thereon. The elongated shaft assembly **4008** includes a rotatable proximal closure tube **4010** that is rotatably journaled on a proximal spine member **4020** that is rigidly coupled to the tool mounting plate **4102**. The proximal spine member **4020** has a distal end that is coupled to an elongated channel portion **4022** of a surgical end effector **4012**. The surgical effector **4012** may be substantially similar to surgical end effector **3412** described above. In addition, the anvil **4024** of the surgical end effector **4012** may be opened and closed by a distal closure tube **4030** that operably interfaces with the proximal closure tube **4010**. Distal closure tube **4030** is identical to distal closure tube **3430** described above. Similarly, proximal closure tube **4010** is identical to proximal closure tube segment **3410** described above.

Anvil **4024** is opened and closed by rotating the proximal closure tube **4010** in manner described above with respect to distal closure tube **3410**. In at least one embodiment, the transmission arrangement comprises a closure transmission, generally designated as **4011**. As will be further discussed

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below, the closure transmission **4011** is configured to receive a corresponding first rotary motion from the robotic system **1000** and convert that first rotary motion to a primary rotary motion for rotating the rotatable proximal closure tube **4010** about the longitudinal tool axis LT-LT. As can be seen in FIG. **96**, a proximal end **4060** of the proximal closure tube **4010** is rotatably supported within a cradle arrangement **4104** that is attached to a tool mounting plate **4102** of the tool mounting portion **4100**. A rotation gear **4062** is formed on or attached to the proximal end **4060** of the closure tube segment **4010** for meshing engagement with a rotation drive assembly **4070** that is operably supported on the tool mounting plate **4102**. In at least one embodiment, a rotation drive gear **4072** is coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **4102** when the tool mounting portion **4100** is coupled to the tool holder **1270**. See FIGS. **26** and **96**. The rotation drive assembly **4070** further comprises a rotary driven gear **4074** that is rotatably supported on the tool mounting plate **4102** in meshing engagement with the rotation gear **4062** and the rotation drive gear **4072**. Application of a first rotary control motion from the robotic system **1000** through the tool holder **1270** and the adapter **1240** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **4072** by virtue of being operably coupled thereto. Rotation of the rotation drive gear **4072** ultimately results in the rotation of the closure tube segment **4010** to open and close the anvil **4024** as described above.

As indicated above, the end effector **4012** employs a cutting element **3860** as shown in FIGS. **94** and **95**. In at least one non-limiting embodiment, the transmission arrangement **4103** further comprises a knife drive transmission that includes a knife drive assembly **4080**. FIG. **96** illustrates one form of knife drive assembly **4080** for axially advancing the knife bar **4092** that is attached to such cutting element using cables as described above with respect to surgical tool **3800**. In particular, the knife bar **4092** replaces the firing cable **3884** employed in an embodiment of surgical tool **3800**. One form of the knife drive assembly **4080** comprises a rotary drive gear **4082** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **4102** when the tool mounting portion **4100** is coupled to the tool holder **1270**. See FIGS. **26** and **96**. The knife drive assembly **4080** further comprises a first rotary driven gear assembly **4084** that is rotatably supported on the tool mounting plate **4102**. The first rotary driven gear assembly **4084** is in meshing engagement with a third rotary driven gear assembly **4086** that is rotatably supported on the tool mounting plate **4102** and which is in meshing engagement with a fourth rotary driven gear assembly **4088** that is in meshing engagement with a threaded portion **4094** of drive shaft assembly **4090** that is coupled to the knife bar **4092**. Rotation of the rotary drive gear **4082** in a second rotary direction will result in the axial advancement of the drive shaft assembly **4090** and knife bar **4092** in the distal direction “DD”. Conversely, rotation of the rotary drive gear **4082** in a secondary rotary direction (opposite to the second rotary direction) will cause the drive shaft assembly **4090** and the knife bar **4092** to move in the proximal direction. Movement of the firing bar **4092** in the proximal direction “PD” will drive the cutting element **3860** in the distal direction “DD”. Conversely, movement of the firing bar **4092** in the distal direction “DD” will result in the movement of the cutting element **3860** in the proximal direction “PD”.

FIGS. **97-103** illustrate yet another surgical tool **5000** that may be effectively employed in connection with a robotic system **1000**. In various forms, the surgical tool **5000** includes

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a surgical end effector **5012** in the form of a surgical stapling instrument that includes an elongated channel **5020** and a pivotally translatable clamping member, such as an anvil **5070**, which are maintained at a spacing that assures effective stapling and severing of tissue clamped in the surgical end effector **5012**. As can be seen in FIG. **99**, the elongated channel **5020** may be substantially U-shaped in cross-section and be fabricated from, for example, titanium, 203 stainless steel, 304 stainless steel, 416 stainless steel, 17-4 stainless steel, 17-7 stainless steel, 6061 or 7075 aluminum, chromium steel, ceramic, etc. A substantially U-shaped metal channel pan **5022** may be supported in the bottom of the elongated channel **5020** as shown.

Various embodiments include an actuation member in the form of a sled assembly **5030** that is operably supported within the surgical end effector **5012** and axially movable therein between a starting position and an ending position in response to control motions applied thereto. In some forms, the metal channel pan **5022** has a centrally-disposed slot **5024** therein to movably accommodate a base portion **5032** of the sled assembly **5030**. The base portion **5032** includes a foot portion **5034** that is sized to be slidably received in a slot **5021** in the elongated channel **5020**. See FIG. **104**. As can be seen in FIGS. **98**, **99**, **102**, and **103**, the base portion **5032** of sled assembly **5030** includes an axially extending threaded bore **5036** that is configured to be threadedly received on a threaded drive shaft **5130** as will be discussed in further detail below. In addition, the sled assembly **5030** includes an upstanding support portion **5038** that supports a tissue cutting blade or tissue cutting instrument **5040**. The upstanding support portion **5038** terminates in a top portion **5042** that has a pair of laterally extending retaining fins **5044** protruding therefrom. As shown in FIG. **99**, the fins **5044** are positioned to be received within corresponding slots **5072** in anvil **5070**. The fins **5044** and the foot **5034** serve to retain the anvil **5070** in a desired spaced closed position as the sled assembly **5030** is driven distally through the tissue clamped within the surgical end effector **5014**. As can also be seen in FIGS. **101** and **103**, the sled assembly **5030** further includes a reciprocatably or sequentially activatable drive assembly **5050** for driving staple pushers toward the closed anvil **5070**.

More specifically and with reference to FIGS. **99** and **100**, the elongated channel **5020** is configured to operably support a surgical staple cartridge **5080** therein. In at least one form, the surgical staple cartridge **5080** comprises a body portion **5082** that may be fabricated from, for example, Vectra, Nylon (6/6 or 6/12) and include a centrally disposed slot **5084** for accommodating the upstanding support portion **5038** of the sled assembly **5030**. See FIG. **99**. These materials could also be filled with glass, carbon, or mineral fill of 10%-40%. The surgical staple cartridge **5080** further includes a plurality of cavities **5086** for movably supporting lines or rows of staple-supporting pushers **5088** therein. The cavities **5086** may be arranged in spaced longitudinally extending lines or rows **5090**, **5092**, **5094**, **5096**. For example, the rows **5090** may be referred to herein as first outboard rows. The rows **5092** may be referred to herein as first inboard rows. The rows **5094** may be referred to as second inboard rows and the rows **5096** may be referred to as second outboard rows. The first inboard row **5090** and the first outboard row **5092** are located on a first lateral side of the longitudinal slot **5084** and the second inboard row **5094** and the second outboard row **5096** are located on a second lateral side of the longitudinal slot **5084**. The first staple pushers **5088** in the first inboard row **5092** are staggered in relationship to the first staple pushers **5088** in the first outboard row **5090**. Similarly, the second staple pushers **5088** in the second outboard row **5096** are staggered in rela-

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tionship to the second pushers **5088** in the second inboard row **5094**. Each pusher **5088** operably supports a surgical staple **5098** thereon.

In various embodiments, the sequentially-activatable or reciprocatably-activatable drive assembly **5050** includes a pair of outboard drivers **5052** and a pair of inboard drivers **5054** that are each attached to a common shaft **5056** that is rotatably mounted within the base **5032** of the sled assembly **5030**. The outboard drivers **5052** are oriented to sequentially or reciprocatingly engage a corresponding plurality of outboard activation cavities **5026** provided in the channel pan **5022**. Likewise, the inboard drivers **5054** are oriented to sequentially or reciprocatingly engage a corresponding plurality of inboard activation cavities **5028** provided in the channel pan **5022**. The inboard activation cavities **5028** are arranged in a staggered relationship relative to the adjacent outboard activation cavities **5026**. See FIG. **100**. As can also be seen in FIGS. **100** and **102**, in at least one embodiment, the sled assembly **5030** further includes distal wedge segments **5060** and intermediate wedge segments **5062** located on each side of the bore **5036** to engage the pushers **5088** as the sled assembly **5030** is driven distally in the distal direction "DD". As indicated above, the sled assembly **5030** is threadedly received on a threaded portion **5132** of a drive shaft **5130** that is rotatably supported within the end effector **5012**. In various embodiments, for example, the drive shaft **5130** has a distal end **5134** that is supported in a distal bearing **5136** mounted in the surgical end effector **5012**. See FIGS. **99** and **100**.

In various embodiments, the surgical end effector **5012** is coupled to a tool mounting portion **5200** by an elongated shaft assembly **5108**. In at least one embodiment, the tool mounting portion **5200** operably supports a transmission arrangement generally designated as **5204** that is configured to receive rotary output motions from the robotic system. The elongated shaft assembly **5108** includes an outer closure tube **5110** that is rotatable and axially movable on a spine member **5120** that is rigidly coupled to a tool mounting plate **5201** of the tool mounting portion **5200**. The spine member **5120** also has a distal end **5122** that is coupled to the elongated channel portion **5020** of the surgical end effector **5012**.

In use, it may be desirable to rotate the surgical end effector **5012** about a longitudinal tool axis LT-LT defined by the elongated shaft assembly **5008**. In various embodiments, the outer closure tube **5110** has a proximal end **5112** that is rotatably supported on the tool mounting plate **5201** of the tool drive portion **5200** by a forward support cradle **5203**. The proximal end **5112** of the outer closure tube **5110** is configured to operably interface with a rotation transmission portion **5206** of the transmission arrangement **5204**. In various embodiments, the proximal end **5112** of the outer closure tube **5110** is also supported on a closure sled **5140** that is also movably supported on the tool mounting plate **5201**. A closure tube gear segment **5114** is formed on the proximal end **5112** of the outer closure tube **5110** for meshing engagement with a rotation drive assembly **5150** of the rotation transmission **5206**. As can be seen in FIG. **97**, the rotation drive assembly **5150**, in at least one embodiment, comprises a rotation drive gear **5152** that is coupled to a corresponding first one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **5201** when the tool drive portion **5200** is coupled to the tool holder **1270**. The rotation drive assembly **5150** further comprises a rotary driven gear **5154** that is rotatably supported on the tool mounting plate **5201** in meshing engagement with the closure tube gear segment **5114** and the rotation drive gear **5152**. Application of a first rotary control motion from the robotic system **1000** through the tool holder **1270** and the adapter **1240** to the

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corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **5152**. Rotation of the rotation drive gear **5152** ultimately results in the rotation of the elongated shaft assembly **5108** (and the end effector **5012**) about the longitudinal tool axis LT-LT (represented by arrow "R" in FIG. 97).

Closure of the anvil **5070** relative to the surgical staple cartridge **5080** is accomplished by axially moving the outer closure tube **5110** in the distal direction "DD". Such axial movement of the outer closure tube **5110** may be accomplished by a closure transmission portion **5144** of the transmission arrangement **5204**. As indicated above, in various embodiments, the proximal end **5112** of the outer closure tube **5110** is supported by the closure sled **5140** which enables the proximal end **5112** to rotate relative thereto, yet travel axially with the closure sled **5140**. In particular, as can be seen in FIG. 97, the closure sled **5140** has an upstanding tab **5141** that extends into a radial groove **5115** in the proximal end portion **5112** of the outer closure tube **5110**. In addition, as was described above, the closure sled **5140** is slidably mounted to the tool mounting plate **5201**. In various embodiments, the closure sled **5140** has an upstanding portion **5142** that has a closure rack gear **5143** formed thereon. The closure rack gear **5143** is configured for driving engagement with the closure transmission **5144**.

In various forms, the closure transmission **5144** includes a closure spur gear **5145** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **5201**. Thus, application of a second rotary control motion from the robotic system **1000** through the tool holder **1270** and the adapter **1240** to the corresponding second driven element **1304** will cause rotation of the closure spur gear **5145** when the interface **1230** is coupled to the tool mounting portion **5200**. The closure transmission **5144** further includes a driven closure gear set **5146** that is supported in meshing engagement with the closure spur gear **5145** and the closure rack gear **5143**. Thus, application of a second rotary control motion from the robotic system **1000** through the tool holder **1270** and the adapter **1240** to the corresponding second driven element **1304** will cause rotation of the closure spur gear **5145** and ultimately drive the closure sled **5140** and the outer closure tube **5110** axially. The axial direction in which the closure tube **5110** moves ultimately depends upon the direction in which the second driven element **1304** is rotated. For example, in response to one rotary closure motion received from the robotic system **1000**, the closure sled **5140** will be driven in the distal direction "DD" and ultimately the outer closure tube **5110** will be driven in the distal direction as well. The outer closure tube **5110** has an opening **5117** in the distal end **5116** that is configured for engagement with a tab **5071** on the anvil **5070** in the manners described above. As the outer closure tube **5110** is driven distally, the proximal end **5116** of the closure tube **5110** will contact the anvil **5070** and pivot it closed. Upon application of an "opening" rotary motion from the robotic system **1000**, the closure sled **5140** and outer closure tube **5110** will be driven in the proximal direction "PD" and pivot the anvil **5070** to the open position in the manners described above.

In at least one embodiment, the drive shaft **5130** has a proximal end **5137** that has a proximal shaft gear **5138** attached thereto. The proximal shaft gear **5138** is supported in meshing engagement with a distal drive gear **5162** attached to a rotary drive bar **5160** that is rotatably supported with spine member **5120**. Rotation of the rotary drive bar **5160** and ultimately rotary drive shaft **5130** is controlled by a rotary knife transmission **5207** which comprises a portion of the

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transmission arrangement **5204** supported on the tool mounting plate **5210**. In various embodiments, the rotary knife transmission **5207** comprises a rotary knife drive system **5170** that is operably supported on the tool mounting plate **5201**. In various embodiments, the knife drive system **5170** includes a rotary drive gear **5172** that is coupled to a corresponding third one of the driven discs or elements **1304** on the adapter side of the tool mounting plate **5201** when the tool drive portion **5200** is coupled to the tool holder **1270**. The knife drive system **5170** further comprises a first rotary driven gear **5174** that is rotatably supported on the tool mounting plate **5201** in meshing engagement with a second rotary driven gear **5176** and the rotary drive gear **5172**. The second rotary driven gear **5176** is coupled to a proximal end portion **5164** of the rotary drive bar **5160**.

Rotation of the rotary drive gear **5172** in a first rotary direction will result in the rotation of the rotary drive bar **5160** and rotary drive shaft **5130** in a first direction. Conversely, rotation of the rotary drive gear **5172** in a second rotary direction (opposite to the first rotary direction) will cause the rotary drive bar **5160** and rotary drive shaft **5130** to rotate in a second direction. **2400**. Thus, rotation of the drive shaft **2440** results in rotation of the drive sleeve **2400**.

One method of operating the surgical tool **5000** will now be described. The tool drive **5200** is operably coupled to the interface **1240** of the robotic system **1000**. The controller **1001** of the robotic system **1000** is operated to locate the tissue to be cut and stapled between the open anvil **5070** and the surgical staple cartridge **5080**. Once the surgical end effector **5012** has been positioned by the robot system **1000** such that the target tissue is located between the anvil **5070** and the surgical staple cartridge **5080**, the controller **1001** of the robotic system **1000** may be activated to apply the second rotary output motion to the second driven element **1304** coupled to the closure spur gear **5145** to drive the closure sled **5140** and the outer closure tube **5110** axially in the distal direction to pivot the anvil **5070** closed in the manner described above. Once the robotic controller **1001** determines that the anvil **5070** has been closed by, for example, sensors in the surgical end effector **5012** and/or the tool drive portion **5200**, the robotic controller **1001** system may provide the surgeon with an indication that signifies the closure of the anvil. Such indication may be, for example, in the form of a light and/or audible sound, tactile feedback on the control members, etc. Then the surgeon may initiate the firing process. In alternative embodiments, however, the robotic controller **1001** may automatically commence the firing process.

To commence the firing process, the robotic controller applies a third rotary output motion to the third driven disc or element **1304** coupled to the rotary drive gear **5172**. Rotation of the rotary drive gear **5172** results in the rotation of the rotary drive bar **5160** and rotary drive shaft **5130** in the manner described above. Firing and formation of the surgical staples **5098** can be best understood from reference to FIGS. **98**, **100**, and **101**. As the sled assembly **5030** is driven in the distal direction "DD" through the surgical staple cartridge **5080**, the distal wedge segments **5060** first contact the staple pushers **5088** and start to move them toward the closed anvil **5070**. As the sled assembly **5030** continues to move distally, the outboard drivers **5052** will drop into the corresponding activation cavity **5026** in the channel pan **5022**. The opposite end of each outboard driver **5052** will then contact the corresponding outboard pusher **5088** that has moved up the distal and intermediate wedge segments **5060**, **5062**. Further distal movement of the sled assembly **5030** causes the outboard drivers **5052** to rotate and drive the corresponding pushers **5088** toward the anvil **5070** to cause the staples **5098** sup-

ported thereon to be formed as they are driven into the anvil 5070. It will be understood that as the sled assembly 5030 moves distally, the knife blade 5040 cuts through the tissue that is clamped between the anvil and the staple cartridge. Because the inboard drivers 5054 and outboard drivers 5052 are attached to the same shaft 5056 and the inboard drivers 5054 are radially offset from the outboard drivers 5052 on the shaft 5056, as the outboard drivers 5052 are driving their corresponding pushers 5088 toward the anvil 5070, the inboard drivers 5054 drop into their next corresponding activation cavity 5028 to cause them to rotatably or reciprocatingly drive the corresponding inboard pushers 5088 towards the closed anvil 5070 in the same manner. Thus, the laterally corresponding outboard staples 5098 on each side of the centrally disposed slot 5084 are simultaneously formed together and the laterally corresponding inboard staples 5098 on each side of the slot 5084 are simultaneously formed together as the sled assembly 5030 is driven distally. Once the robotic controller 1001 determines that the sled assembly 5030 has reached its distal most position—either through sensors or through monitoring the amount of rotary input applied to the drive shaft 5130 and/or the rotary drive bar 5160, the controller 1001 may then apply a third rotary output motion to the drive shaft 5130 to rotate the drive shaft 5130 in an opposite direction to retract the sled assembly 5030 back to its starting position. Once the sled assembly 5030 has been retracted to the starting position (as signaled by sensors in the end effector 5012 and/or the tool drive portion 5200), the application of the second rotary motion to the drive shaft 5130 is discontinued. Thereafter, the surgeon may manually activate the anvil opening process or it may be automatically commenced by the robotic controller 1001. To open the anvil 5070, the second rotary output motion is applied to the closure spur gear 5145 to drive the closure sled 5140 and the outer closure tube 5110 axially in the proximal direction. As the closure tube 5110 moves proximally, the opening 5117 in the distal end 5116 of the closure tube 5110 contacts the tab 5071 on the anvil 5070 to pivot the anvil 5070 to the open position. A spring may also be employed to bias the anvil 5070 to the open position when the closure tube 5116 has been returned to the starting position. Again, sensors in the surgical end effector 5012 and/or the tool mounting portion 5200 may provide the robotic controller 1001 with a signal indicating that the anvil 5070 is now open. Thereafter, the surgical end effector 5012 may be withdrawn from the surgical site.

FIGS. 104-109 diagrammatically depict the sequential firing of staples in a surgical tool assembly 5000' that is substantially similar to the surgical tool assembly 5000 described above. In this embodiment, the inboard and outboard drivers 5052', 5054' have a cam-like shape with a cam surface 5053 and an actuator protrusion 5055 as shown in FIGS. 104-110. The drivers 5052', 5054' are journaled on the same shaft 5056' that is rotatably supported by the sled assembly 5030'. In this embodiment, the sled assembly 5030' has distal wedge segments 5060' for engaging the pushers 5088. FIG. 104 illustrates an initial position of two inboard or outboard drivers 5052', 5054' as the sled assembly 5030' is driven in the distal direction "DD". As can be seen in that Figure, the pusher 5088a has advanced up the wedge segment 5060' and has contacted the driver 5052', 5054'. Further travel of the sled assembly 5030' in the distal direction causes the driver 5052', 5054' to pivot in the "P" direction (FIG. 105) until the actuator portion 5055 contacts the end wall 5029a of the activation cavity 5026, 5028 as shown in FIG. 111. Continued advancement of the sled assembly 5030' in the distal direction "DD" causes the driver 5052', 5054' to rotate in the "D" direction as

shown in FIG. 107. As the driver 5052', 5054' rotates, the pusher 5088a rides up the cam surface 5053 to the final vertical position shown in FIG. 108. When the pusher 5088a reaches the final vertical position shown in FIGS. 108 and 109, the staple (not shown) supported thereon has been driven into the staple forming surface of the anvil to form the staple.

FIGS. 111-116 illustrate a surgical end effector 5312 that may be employed for example, in connection with the tool mounting portion 1300 and shaft 2008 described in detail above. In various forms, the surgical end effector 5312 includes an elongated channel 5322 that is constructed as described above for supporting a surgical staple cartridge 5330 therein. The surgical staple cartridge 5330 comprises a body portion 5332 that includes a centrally disposed slot 5334 for accommodating an upstanding support portion 5386 of a sled assembly 5380. See FIGS. 111-113. The surgical staple cartridge body portion 5332 further includes a plurality of cavities 5336 for movably supporting staple-supporting pushers 5350 therein. The cavities 5336 may be arranged in spaced longitudinally extending rows 5340, 5342, 5344, 5346. The rows 5340, 5342 are located on one lateral side of the longitudinal slot 5334 and the rows 5344, 5346 are located on the other side of longitudinal slot 5334. In at least one embodiment, the pushers 5350 are configured to support two surgical staples 5352 thereon. In particular, each pusher 5350 located on one side of the elongated slot 5334 supports one staple 5352 in row 5340 and one staple 5352 in row 5342 in a staggered orientation. Likewise, each pusher 5350 located on the other side of the elongated slot 5334 supports one surgical staple 5352 in row 5344 and another surgical staple 5352 in row 5346 in a staggered orientation. Thus, every pusher 5350 supports two surgical staples 5352.

As can be further seen in FIGS. 111, 112, the surgical staple cartridge 5330 includes a plurality of rotary drivers 5360. More particularly, the rotary drivers 5360 on one side of the elongated slot 5334 are arranged in a single line 5370 and correspond to the pushers 5350 in lines 5340, 5342. In addition, the rotary drivers 5360 on the other side of the elongated slot 5334 are arranged in a single line 5372 and correspond to the pushers 5350 in lines 5344, 5346. As can be seen in FIG. 116, each rotary driver 5360 is rotatably supported within the staple cartridge body 5332. More particularly, each rotary driver 5360 is rotatably received on a corresponding driver shaft 5362. Each driver 5360 has an arcuate ramp portion 5364 formed thereon that is configured to engage an arcuate lower surface 5354 formed on each pusher 5350. See FIG. 116. In addition, each driver 5360 has a lower support portion 5366 extend therefrom to slidably support the pusher 5360 on the channel 5322. Each driver 5360 has a downwardly extending actuation rod 5368 that is configured for engagement with a sled assembly 5380.

As can be seen in FIG. 113, in at least one embodiment, the sled assembly 5380 includes a base portion 5382 that has a foot portion 5384 that is sized to be slidably received in a slot 5333 in the channel 5322. See FIG. 111. The sled assembly 5380 includes an upstanding support portion 5386 that supports a tissue cutting blade or tissue cutting instrument 5388. The upstanding support portion 5386 terminates in a top portion 5390 that has a pair of laterally extending retaining fins 5392 protruding therefrom. The fins 5392 are positioned to be received within corresponding slots (not shown) in the anvil (not shown). As with the above-described embodiments, the fins 5392 and the foot portion 5384 serve to retain the anvil (not shown) in a desired spaced closed position as the sled assembly 5380 is driven distally through the tissue clamped within the surgical end effector 5312. The upstanding support portion 5386 is configured for attachment to a

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knife bar **2200** (FIG. 32). The sled assembly **5380** further has a horizontally-extending actuator plate **5394** that is shaped for actuating engagement with each of the actuation rods **5368** on the pushers **5360**.

Operation of the surgical end effector **5312** will now be explained with reference to FIGS. 111 and 112. As the sled assembly **5380** is driven in the distal direction “DD” through the staple cartridge **5330**, the actuator plate **5394** sequentially contacts the actuation rods **5368** on the pushers **5360**. As the sled assembly **5380** continues to move distally, the actuator plate **5394** sequentially contacts the actuator rods **5368** of the drivers **5360** on each side of the elongated slot **5334**. Such action causes the drivers **5360** to rotate from a first unactuated position to an actuated portion wherein the pushers **5350** are driven towards the closed anvil. As the pushers **5350** are driven toward the anvil, the surgical staples **5352** thereon are driven into forming contact with the underside of the anvil. Once the robotic system **1000** determines that the sled assembly **5080** has reached its distal most position through sensors or other means, the control system of the robotic system **1000** may then retract the knife bar and sled assembly **5380** back to the starting position. Thereafter, the robotic control system may then activate the procedure for returning the anvil to the open position to release the stapled tissue.

FIGS. 117-121 depict one form of an automated reloading system embodiment of the present invention, generally designated as **5500**. In one form, the automated reloading system **5500** is configured to replace a “spent” surgical end effector component in a manipulatable surgical tool portion of a robotic surgical system with a “new” surgical end effector component. As used herein, the term “surgical end effector component” may comprise, for example, a surgical staple cartridge, a disposable loading unit or other end effector components that, when used, are spent and must be replaced with a new component. Furthermore, the term “spent” means that the end effector component has been activated and is no longer useable for its intended purpose in its present state. For example, in the context of a surgical staple cartridge or disposable loading unit, the term “spent” means that at least some of the unformed staples that were previously supported therein have been “fired” therefrom. As used herein, the term “new” surgical end effector component refers to an end effector component that is in condition for its intended use. In the context of a surgical staple cartridge or disposable loading unit, for example, the term “new” refers to such a component that has unformed staples therein and which is otherwise ready for use.

In various embodiments, the automated reloading system **5500** includes a base portion **5502** that may be strategically located within a work envelope **1109** of a robotic arm cart **1100** (FIG. 18) of a robotic system **1000**. As used herein, the term “manipulatable surgical tool portion” collectively refers to a surgical tool of the various types disclosed herein and other forms of surgical robotically-actuated tools that are operably attached to, for example, a robotic arm cart **1100** or similar device that is configured to automatically manipulate and actuate the surgical tool. The term “work envelope” as used herein refers to the range of movement of the manipulatable surgical tool portion of the robotic system. FIG. 18 generally depicts an area that may comprise a work envelope of the robotic arm cart **1100**. Those of ordinary skill in the art will understand that the shape and size of the work envelope depicted therein is merely illustrative. The ultimate size, shape and location of a work envelope will ultimately depend upon the construction, range of travel limitations, and location of the manipulatable surgical tool portion. Thus, the term “work envelope” as used herein is intended to cover a variety

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of different sizes and shapes of work envelopes and should not be limited to the specific size and shape of the sample work envelope depicted in FIG. 18.

As can be seen in FIG. 117, the base portion **5502** includes a new component support section or arrangement **5510** that is configured to operably support at least one new surgical end effector component in a “loading orientation”. As used herein, the term “loading orientation” means that the new end effector component is supported in such away so as to permit the corresponding component support portion of the manipulatable surgical tool portion to be brought into loading engagement with (i.e., operably seated or operably attached to) the new end effector component (or the new end effector component to be brought into loading engagement with the corresponding component support portion of the manipulatable surgical tool portion) without human intervention beyond that which may be necessary to actuate the robotic system. As will be further appreciated as the present Detailed Description proceeds, in at least one embodiment, the preparation nurse will load the new component support section before the surgery with the appropriate length and color cartridges (some surgical staple cartridges may support certain sizes of staples the size of which may be indicated by the color of the cartridge body) required for completing the surgical procedure. However, no direct human interaction is necessary during the surgery to reload the robotic endocutter. In one form, the surgical end effector component comprises a staple cartridge **2034** that is configured to be operably seated within a component support portion (elongated channel) of any of the various other end effector arrangements described above. For explanation purposes, new (unused) cartridges will be designated as “**2034a**” and spent cartridges will be designated as “**2034b**”. The Figures depict cartridges **2034a**, **2034b** designed for use with a surgical end effector **2012** that includes a channel **2022** and an anvil **2024**, the construction and operation of which were discussed in detail above. Cartridges **2034a**, **2034b** are identical to cartridges **2034** described above. In various embodiments, the cartridges **2034a**, **2034b** are configured to be snappingly retained (i.e., loading engagement) within the channel **2022** of a surgical end effector **2012**. As the present Detailed Description proceeds, however, those of ordinary skill in the art will appreciate that the unique and novel features of the automated cartridge reloading system **5500** may be effectively employed in connection with the automated removal and installation of other cartridge arrangements without departing from the spirit and scope of the present invention.

In the depicted embodiment, the term “loading orientation” means that the distal tip portion **2035a** of the a new surgical staple cartridge **2034a** is inserted into a corresponding support cavity **5512** in the new cartridge support section **5510** such that the proximal end portion **2037a** of the new surgical staple cartridge **2034a** is located in a convenient orientation for enabling the arm cart **1100** to manipulate the surgical end effector **2012** into a position wherein the new cartridge **2034a** may be automatically loaded into the channel **2022** of the surgical end effector **2012**. In various embodiments, the base **5502** includes at least one sensor **5504** which communicates with the control system **1003** of the robotic controller **1001** to provide the control system **1003** with the location of the base **5502** and/or the reload length and color doe each staged or new cartridge **2034a**.

As can also be seen in the Figures, the base **5502** further includes a collection receptacle **5520** that is configured to collect spent cartridges **2034b** that have been removed or disengaged from the surgical end effector **2012** that is operably attached to the robotic system **1000**. In addition, in one

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form, the automated reloading system **5500** includes an extraction system **5530** for automatically removing the spent end effector component from the corresponding support portion of the end effector or manipulatable surgical tool portion without specific human intervention beyond that which may be necessary to activate the robotic system. In various embodiments, the extraction system **5530** includes an extraction hook member **5532**. In one form, for example, the extraction hook member **5532** is rigidly supported on the base portion **5502**. In one embodiment, the extraction hook member has at least one hook **5534** formed thereon that is configured to hookingly engage the distal end **2035** of a spent cartridge **2034b** when it is supported in the elongated channel **2022** of the surgical end effector **2012**. In various forms, the extraction hook member **5532** is conveniently located within a portion of the collection receptacle **5520** such that when the spent end effector component (cartridge **2034b**) is brought into extractive engagement with the extraction hook member **5532**, the spent end effector component (cartridge **2034b**) is dislodged from the corresponding component support portion (elongated channel **2022**), and falls into the collection receptacle **5520**. Thus, to use this embodiment, the manipulatable surgical tool portion manipulates the end effector attached thereto to bring the distal end **2035** of the spent cartridge **2034b** therein into hooking engagement with the hook **5534** and then moves the end effector in such a way to dislodge the spent cartridge **2034b** from the elongated channel **2022**.

In other arrangements, the extraction hook member **5532** comprises a rotatable wheel configuration that has a pair of diametrically-opposed hooks **5534** protruding therefrom. See FIGS. **122** and **125**. The extraction hook member **5532** is rotatably supported within the collection receptacle **5520** and is coupled to an extraction motor **5540** that is controlled by the controller **1001** of the robotic system. This form of the automated reloading system **5500** may be used as follows. FIG. **119** illustrates the introduction of the surgical end effector **2012** that is operably attached to the manipulatable surgical tool portion **1200**. As can be seen in that Figure, the arm cart **1100** of the robotic system **1000** locates the surgical end effector **2012** in the shown position wherein the hook end **5534** of the extraction member **5532** hookingly engages the distal end **2035** of the spent cartridge **2034b** in the surgical end effector **2012**. The anvil **2024** of the surgical end effector **2012** is in the open position. After the distal end **2035** of the spent cartridge **2034b** is engaged with the hook end **5532**, the extraction motor **5540** is actuated to rotate the extraction wheel **5532** to disengage the spent cartridge **2034b** from the channel **2022**. To assist with the disengagement of the spent cartridge **2034b** from the channel **2022** (or if the extraction member **5530** is stationary), the robotic system **1000** may move the surgical end effector **2012** in an upward direction (arrow "U" in FIG. **120**). As the spent cartridge **2034b** is dislodged from the channel **2022**, the spent cartridge **2034b** falls into the collection receptacle **5520**. Once the spent cartridge **2034b** has been removed from the surgical end effector **2012**, the robotic system **1000** moves the surgical end effector **2012** to the position shown in FIG. **121**.

In various embodiments, a sensor arrangement **5533** is located adjacent to the extraction member **5532** that is in communication with the controller **1001** of the robotic system **1000**. The sensor arrangement **5533** may comprise a sensor that is configured to sense the presence of the surgical end effector **2012** and, more particularly the tip **2035b** of the spent surgical staple cartridge **2034b** thereof as the distal tip portion **2035b** is brought into engagement with the extraction mem-

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ber **5532**. In some embodiments, the sensor arrangement **5533** may comprise, for example, a light curtain arrangement. However, other forms of proximity sensors may be employed. In such arrangement, when the surgical end effector **2012** with the spent surgical staple cartridge **2034b** is brought into extractive engagement with the extraction member **5532**, the sensor senses the distal tip **2035b** of the surgical staple cartridge **2034b** (e.g., the light curtain is broken). When the extraction member **5532** spins and pops the surgical staple cartridge **2034b** loose and it falls into the collection receptacle **5520**, the light curtain is again unbroken. Because the surgical end effector **2012** was not moved during this procedure, the robotic controller **1001** is assured that the spent surgical staple cartridge **2034b** has been removed therefrom. Other sensor arrangements may also be successfully employed to provide the robotic controller **1001** with an indication that the spent surgical staple cartridge **2034b** has been removed from the surgical end effector **2012**.

As can be seen in FIG. **121**, the surgical end effector **2012** is positioned to grasp a new surgical staple cartridge **2034a** between the channel **2022** and the anvil **2024**. More specifically, as shown in FIGS. **118** and **121**, each cavity **5512** has a corresponding upstanding pressure pad **5514** associated with it. The surgical end effector **2012** is located such that the pressure pad **5514** is located between the new cartridge **2034a** and the anvil **2024**. Once in that position, the robotic system **1000** closes the anvil **2024** onto the pressure pad **5514** which serves to push the new cartridge **2034a** into snapping engagement with the channel **2022** of the surgical end effector **2012**. Once the new cartridge **2034a** has been snapped into position within the elongated channel **2022**, the robotic system **1000** then withdraws the surgical end effector **2012** from the automated cartridge reloading system **5500** for use in connection with performing another surgical procedure.

FIGS. **122-126** depict another automated reloading system **5600** that may be used to remove a spent disposable loading unit **3612** from a manipulatable surgical tool arrangement **3600** (FIGS. **69-82**) that is operably attached to an arm cart **1100** or other portion of a robotic system **1000** and reload a new disposable loading unit **3612** therein. As can be seen in FIGS. **122** and **123**, one form of the automated reloading system **5600** includes a housing **5610** that has a movable support assembly in the form of a rotary carousel top plate **5620** supported thereon which cooperates with the housing **5610** to form a hollow enclosed area **5612**. The automated reloading system **5600** is configured to be operably supported within the work envelop of the manipulatable surgical tool portion of a robotic system as was described above. In various embodiments, the rotary carousel plate **5620** has a plurality of holes **5622** for supporting a plurality of orientation tubes **5660** therein. As can be seen in FIGS. **123** and **124**, the rotary carousel plate **5620** is affixed to a spindle shaft **5624**. The spindle shaft **5624** is centrally disposed within the enclosed area **5612** and has a spindle gear **5626** attached thereto. The spindle gear **5626** is in meshing engagement with a carousel drive gear **5628** that is coupled to a carousel drive motor **5630** that is in operative communication with the robotic controller **1001** of the robotic system **1000**.

Various embodiments of the automated reloading system **5600** may also include a carousel locking assembly, generally designated as **5640**. In various forms, the carousel locking assembly **5640** includes a cam disc **5642** that is affixed to the spindle shaft **5624**. The spindle gear **5626** may be attached to the underside of the cam disc **5642** and the cam disc **5642** may be keyed onto the spindle shaft **5624**. In alternative arrangements, the spindle gear **5626** and the cam disc **5642** may be independently non-rotatably affixed to the spindle shaft **5624**. As can be seen in FIGS. **123** and **124**, a plurality

of notches **5644** are spaced around the perimeter of the cam disc **5642**. A locking arm **5648** is pivotally mounted within the housing **5610** and is biased into engagement with the perimeter of the cam disc **5642** by a locking spring **5649**. As can be seen in FIG. **122**, the outer perimeter of the cam disc **5642** is rounded to facilitate rotation of the cam disc **5642** relative to the locking arm **5648**. The edges of each notch **5644** are also rounded such that when the cam disc **5642** is rotated, the locking arm **5648** is cammed out of engagement with the notches **5644** by the perimeter of the cam disc **5642**.

Various forms of the automated reloading system **5600** are configured to support a portable/replaceable tray assembly **5650** that is configured to support a plurality of disposable loading units **3612** in individual orientation tubes **5660**. More specifically and with reference to FIGS. **123** and **124**, the replaceable tray assembly **5650** comprises a tray **5652** that has a centrally-disposed locator spindle **5654** protruding from the underside thereof. The locator spindle **5654** is sized to be received within a hollow end **5625** of spindle shaft **5624**. The tray **5652** has a plurality of holes **5656** therein that are configured to support an orientation tube **5660** therein. Each orientation tube **5660** is oriented within a corresponding hole **5656** in the replaceable tray assembly **5650** in a desired orientation by a locating fin **5666** on the orientation tube **5660** that is designed to be received within a corresponding locating slot **5658** in the tray assembly **5650**. In at least one embodiment, the locating fin **5666** has a substantially V-shaped cross-sectional shape that is sized to fit within a V-shaped locating slot **5658**. Such arrangement serves to orient the orientation tube **5660** in a desired starting position while enabling it to rotate within the hole **5656** when a rotary motion is applied thereto. That is, when a rotary motion is applied to the orientation tube **5660** the V-shaped locating fin **5666** will pop out of its corresponding locating slot enabling the tube **5660** to rotate relative to the tray **5652** as will be discussed in further detail below. As can also be seen in FIGS. **122-124**, the replaceable tray **5652** may be provided with one or more handle portions **5653** to facilitate transport of the tray assembly **5652** when loaded with orientation tubes **5660**.

As can be seen in FIG. **126**, each orientation tube **5660** comprises a body portion **5662** that has a flanged open end **5664**. The body portion **5662** defines a cavity **5668** that is sized to receive a portion of a disposable loading unit **3612** therein. To properly orient the disposable loading unit **3612** within the orientation tube **5660**, the cavity **5668** has a flat locating surface **5670** formed therein. As can be seen in FIG. **126**, the flat locating surface **5670** is configured to facilitate the insertion of the disposable loading unit into the cavity **5668** in a desired or predetermined non-rotatable orientation. In addition, the end **5669** of the cavity **5668** may include a foam or cushion material **5672** that is designed to cushion the distal end of the disposable loading unit **3612** within the cavity **5668**. Also, the length of the locating surface may cooperate with a sliding support member **3689** of the axial drive assembly **3680** of the disposable loading unit **3612** to further locate the disposable loading unit **3612** at a desired position within the orientation tube **5660**.

The orientation tubes **5660** may be fabricated from Nylon, polycarbonate, polyethylene, liquid crystal polymer, 6061 or 7075 aluminum, titanium, 300 or 400 series stainless steel, coated or painted steel, plated steel, etc. and, when loaded in the replaceable tray **5662** and the locator spindle **5654** is inserted into the hollow end **5625** of spindle shaft **5624**, the orientation tubes **5660** extend through corresponding holes **5662** in the carousel top plate **5620**. Each replaceable tray **5662** is equipped with a location sensor **5663** that communicates with the control system **1003** of the controller **1001** of

the robotic system **1000**. The sensor **5663** serves to identify the location of the reload system, and the number, length, color and fired status of each reload housed in the tray. In addition, an optical sensor or sensors **5665** that communicate with the robotic controller **1001** may be employed to sense the type/size/length of disposable loading units that are loaded within the tray **5662**.

Various embodiments of the automated reloading system **5600** further include a drive assembly **5680** for applying a rotary motion to the orientation tube **5660** holding the disposable loading unit **3612** to be attached to the shaft **3700** of the surgical tool **3600** (collectively the “manipulatable surgical tool portion”) that is operably coupled to the robotic system. The drive assembly **5680** includes a support yoke **5682** that is attached to the locking arm **5648**. Thus, the support yoke **5682** pivots with the locking arm **5648**. The support yoke **5682** rotatably supports a tube idler wheel **5684** and a tube drive wheel **5686** that is driven by a tube motor **5688** attached thereto. Tube motor **5688** communicates with the control system **1003** and is controlled thereby. The tube idler wheel **5684** and tube drive wheel **5686** are fabricated from, for example, natural rubber, sanoprene, isoplast, etc. such that the outer surfaces thereof create sufficient amount of friction to result in the rotation of an orientation tube **5660** in contact therewith upon activation of the tube motor **5688**. The idler wheel **5684** and tube drive wheel **5686** are oriented relative to each other to create a cradle area **5687** therebetween for receiving an orientation tube **5660** in driving engagement therein.

In use, one or more of the orientation tubes **5660** loaded in the automated reloading system **5600** are left empty, while the other orientation tubes **5660** may operably support a corresponding new disposable loading unit **3612** therein. As will be discussed in further detail below, the empty orientation tubes **5660** are employed to receive a spent disposable loading unit **3612** therein.

The automated reloading system **5600** may be employed as follows after the system **5600** is located within the work envelope of the manipulatable surgical tool portion of a robotic system. If the manipulatable surgical tool portion has a spent disposable loading unit **3612** operably coupled thereto, one of the orientation tubes **5660** that are supported on the replaceable tray **5662** is left empty to receive the spent disposable loading unit **3612** therein. If, however, the manipulatable surgical tool portion does not have a disposable loading unit **3612** operably coupled thereto, each of the orientation tubes **5660** may be provided with a properly oriented new disposable loading unit **3612**.

As described hereinabove, the disposable loading unit **3612** employs a rotary “bayonet-type” coupling arrangement for operably coupling the disposable loading unit **3612** to a corresponding portion of the manipulatable surgical tool portion. That is, to attach a disposable loading unit **3612** to the corresponding portion of the manipulatable surgical tool portion (**3700**—see FIGS. **75, 76**), a rotary installation motion must be applied to the disposable loading unit **3612** and/or the corresponding portion of the manipulatable surgical tool portion when those components have been moved into loading engagement with each other. Such installation motions are collectively referred to herein as “loading motions”. Likewise, to decouple a spent disposable loading unit **3612** from the corresponding portion of the manipulatable surgical tool, a rotary decoupling motion must be applied to the spent disposable loading unit **3612** and/or the corresponding portion of the manipulatable surgical tool portion while simultaneously moving the spent disposable loading unit and the corresponding portion of the manipulatable surgical tool

away from each other. Such decoupling motions are collectively referred to herein as “extraction motions”.

To commence the loading process, the robotic system **1000** is activated to manipulate the manipulatable surgical tool portion and/or the automated reloading system **5600** to bring the manipulatable surgical tool portion into loading engagement with the new disposable loading unit **3612** that is supported in the orientation tube **5660** that is in driving engagement with the drive assembly **5680**. Once the robotic controller **1001** (FIG. 17) of the robotic control system **1000** has located the manipulatable surgical tool portion in loading engagement with the new disposable loading unit **3612**, the robotic controller **1001** activates the drive assembly **5680** to apply a rotary loading motion to the orientation tube **5660** in which the new disposable loading unit **3612** is supported and/or applies another rotary loading motion to the corresponding portion of the manipulatable surgical tool portion. Upon application of such rotary loading motions(s), the robotic controller **1001** also causes the corresponding portion of the manipulatable surgical tool portion to be moved towards the new disposable loading unit **3612** into loading engagement therewith. Once the disposable loading unit **3612** is in loading engagement with the corresponding portion of the manipulatable tool portion, the loading motions are discontinued and the manipulatable surgical tool portion may be moved away from the automated reloading system **5600** carrying with it the new disposable loading unit **3612** that has been operably coupled thereto.

To decouple a spent disposable loading unit **3612** from a corresponding manipulatable surgical tool portion, the robotic controller **1001** of the robotic system manipulates the manipulatable surgical tool portion so as to insert the distal end of the spent disposable loading unit **3612** into the empty orientation tube **5660** that remains in driving engagement with the drive assembly **5680**. Thereafter, the robotic controller **1001** activates the drive assembly **5680** to apply a rotary extraction motion to the orientation tube **5660** in which the spent disposable loading unit **3612** is supported and/or applies a rotary extraction motion to the corresponding portion of the manipulatable surgical tool portion. The robotic controller **1001** also causes the manipulatable surgical tool portion to withdraw away from the spent rotary disposable loading unit **3612**. Thereafter the rotary extraction motion(s) are discontinued.

After the spent disposable loading unit **3612** has been removed from the manipulatable surgical tool portion, the robotic controller **1001** may activate the carousel drive motor **5630** to index the carousel top plate **5620** to bring another orientation tube **5660** that supports a new disposable loading unit **3612** therein into driving engagement with the drive assembly **5680**. Thereafter, the loading process may be repeated to attach the new disposable loading unit **3612** therein to the portion of the manipulatable surgical tool portion. The robotic controller **1001** may record the number of disposable loading units that have been used from a particular replaceable tray **5652**. Once the controller **1001** determines that all of the new disposable loading units **3612** have been used from that tray, the controller **1001** may provide the surgeon with a signal (visual and/or audible) indicating that the tray **5652** supporting all of the spent disposable loading units **3612** must be replaced with a new tray **5652** containing new disposable loading units **3612**.

FIGS. 127-132 depict another non-limiting embodiment of a surgical tool **6000** of the present invention that is well-adapted for use with a robotic system **1000** that has a tool drive assembly **1010** (FIG. 22) that is operatively coupled to a master controller **1001** that is operable by inputs from an

operator (i.e., a surgeon). As can be seen in FIG. 127, the surgical tool **6000** includes a surgical end effector **6012** that comprises an endocutter. In at least one form, the surgical tool **6000** generally includes an elongated shaft assembly **6008** that has a proximal closure tube **6040** and a distal closure tube **6042** that are coupled together by an articulation joint **6100**. The surgical tool **6000** is operably coupled to the manipulator by a tool mounting portion, generally designated as **6200**. The surgical tool **6000** further includes an interface **6030** which may mechanically and electrically couple the tool mounting portion **6200** to the manipulator in the various manners described in detail above.

In at least one embodiment, the surgical tool **6000** includes a surgical end effector **6012** that comprises, among other things, at least one component **6024** that is selectively movable between first and second positions relative to at least one other component **6022** in response to various control motions applied to component **6024** as will be discussed in further detail below to perform a surgical procedure. In various embodiments, component **6022** comprises an elongated channel **6022** configured to operably support a surgical staple cartridge **6034** therein and component **6024** comprises a pivotally translatable clamping member, such as an anvil **6024**. Various embodiments of the surgical end effector **6012** are configured to maintain the anvil **6024** and elongated channel **6022** at a spacing that assures effective stapling and severing of tissue clamped in the surgical end effector **6012**. Unless otherwise stated, the end effector **6012** is similar to the surgical end effector **2012** described above and includes a cutting instrument (not shown) and a sled (not shown). The anvil **6024** may include a tab **6027** at its proximal end that interacts with a component of the mechanical closure system (described further below) to facilitate the opening of the anvil **6024**. The elongated channel **6022** and the anvil **6024** may be made of an electrically conductive material (such as metal) so that they may serve as part of an antenna that communicates with sensor(s) in the end effector, as described above. The surgical staple cartridge **6034** could be made of a nonconductive material (such as plastic) and the sensor may be connected to or disposed in the surgical staple cartridge **6034**, as was also described above.

As can be seen in FIG. 127, the surgical end effector **6012** is attached to the tool mounting portion **6200** by the elongated shaft assembly **6008** according to various embodiments. As shown in the illustrated embodiment, the elongated shaft assembly **6008** includes an articulation joint generally designated as **6100** that enables the surgical end effector **6012** to be selectively articulated about a first tool articulation axis AA1-AA1 that is substantially transverse to a longitudinal tool axis LT-LT and a second tool articulation axis AA2-AA2 that is substantially transverse to the longitudinal tool axis LT-LT as well as the first articulation axis AA1-AA1. See FIG. 128. In various embodiments, the elongated shaft assembly **6008** includes a closure tube assembly **6009** that comprises a proximal closure tube **6040** and a distal closure tube **6042** that are pivotally linked by a pivot links **6044** and **6046**. The closure tube assembly **6009** is movably supported on a spine assembly generally designated as **6102**.

As can be seen in FIG. 129, the proximal closure tube **6040** is pivotally linked to an intermediate closure tube joint **6043** by an upper pivot link **6044U** and a lower pivot link **6044L** such that the intermediate closure tube joint **6043** is pivotable relative to the proximal closure tube **6040** about a first closure axis CA1-CA1 and a second closure axis CA2-CA2. In various embodiments, the first closure axis CA1-CA1 is substantially parallel to the second closure axis CA2-CA2 and both closure axes CA1-CA1, CA2-CA2 are substantially trans-

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verse to the longitudinal tool axis LT-LT. As can be further seen in FIG. 129, the intermediate closure tube joint 6043 is pivotally linked to the distal closure tube 6042 by a left pivot link 6046L and a right pivot link 6046R such that the intermediate closure tube joint 6043 is pivotable relative to the distal closure tube 6042 about a third closure axis CA3-CA3 and a fourth closure axis CA4-CA4. In various embodiments, the third closure axis CA3-CA3 is substantially parallel to the fourth closure axis CA4-CA4 and both closure axes CA3-CA3, CA4-CA4 are substantially transverse to the first and second closure axes CA1-CA1, CA2-CA2 as well as to longitudinal tool axis LT-LT.

The closure tube assembly 6009 is configured to axially slide on the spine assembly 6102 in response to actuation motions applied thereto. The distal closure tube 6042 includes an opening 6045 which interfaces with the tab 6027 on the anvil 6024 to facilitate opening of the anvil 6024 as the distal closure tube 6042 is moved axially in the proximal direction "PD". The closure tubes 6040, 6042 may be made of electrically conductive material (such as metal) so that they may serve as part of the antenna, as described above. Components of the spine assembly 6102 may be made of a non-conductive material (such as plastic).

As indicated above, the surgical tool 6000 includes a tool mounting portion 6200 that is configured for operable attachment to the tool mounting assembly 1010 of the robotic system 1000 in the various manners described in detail above. As can be seen in FIG. 131, the tool mounting portion 6200 comprises a tool mounting plate 6202 that operably supports a transmission arrangement 6204 thereon. In various embodiments, the transmission arrangement 6204 includes an articulation transmission 6142 that comprises a portion of an articulation system 6140 for articulating the surgical end effector 6012 about a first tool articulation axis TA1-TA1 and a second tool articulation axis TA2-TA2. The first tool articulation axis TA1-TA1 is substantially transverse to the second tool articulation axis TA2-TA2 and both of the first and second tool articulation axes are substantially transverse to the longitudinal tool axis LT-LT. See FIG. 128.

To facilitate selective articulation of the surgical end effector 6012 about the first and second tool articulation axes TA1-TA1, TA2-TA2, the spine assembly 6102 comprises a proximal spine portion 6110 that is pivotally coupled to a distal spine portion 6120 by pivot pins 6122 for selective pivotal travel about TA1-TA1. Similarly, the distal spine portion 6120 is pivotally attached to the elongated channel 6022 of the surgical end effector 6012 by pivot pins 6124 to enable the surgical end effector 6012 to selectively pivot about the second tool axis TA2-TA2 relative to the distal spine portion 6120.

In various embodiments, the articulation system 6140 further includes a plurality of articulation elements that operably interface with the surgical end effector 6012 and an articulation control arrangement 6160 that is operably supported in the tool mounting member 6200 as will be described in further detail below. In at least one embodiment, the articulation elements comprise a first pair of first articulation cables 6144 and 6146. The first articulation cables are located on a first or right side of the longitudinal tool axis. Thus, the first articulation cables are referred to herein as a right upper cable 6144 and a right lower cable 6146. The right upper cable 6144 and the right lower cable 6146 extend through corresponding passages 6147, 6148, respectively along the right side of the proximal spine portion 6110. See FIG. 132. The articulation system 6140 further includes a second pair of second articulation cables 6150, 6152. The second articulation cables are located on a second or left side of the longitudinal tool axis.

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Thus, the second articulation cables are referred to herein as a left upper articulation cable 6150 and a left articulation cable 6152. The left upper articulation cable 6150 and the left lower articulation cable 6152 extend through passages 6153, 6154, respectively in the proximal spine portion 6110.

As can be seen in FIG. 128, the right upper cable 6144 extends around an upper pivot joint 6123 and is attached to a left upper side of the elongated channel 6022 at a left pivot joint 6125. The right lower cable 6146 extends around a lower pivot joint 6126 and is attached to a left lower side of the elongated channel 6022 at left pivot joint 6125. The left upper cable 6150 extends around the upper pivot joint 6123 and is attached to a right upper side of the elongated channel 6022 at a right pivot joint 6127. The left lower cable 6152 extends around the lower pivot joint 6126 and is attached to a right lower side of the elongated channel 6022 at right pivot joint 6127. Thus, to pivot the surgical end effector 6012 about the first tool articulation axis TA1-TA1 to the left (arrow "L"), the right upper cable 6144 and the right lower cable 6146 must be pulled in the proximal direction "PD". To articulate the surgical end effector 6012 to the right (arrow "R") about the first tool articulation axis TA1-TA1, the left upper cable 6150 and the left lower cable 6152 must be pulled in the proximal direction "PD". To articulate the surgical end effector 6012 about the second tool articulation axis TA2-TA2, in an upward direction (arrow "U"), the right upper cable 6144 and the left upper cable 6150 must be pulled in the proximal direction "PD". To articulate the surgical end effector 6012 in the downward direction (arrow "DW") about the second tool articulation axis TA2-TA2, the right lower cable 6146 and the left lower cable 6152 must be pulled in the proximal direction "PD".

The proximal ends of the articulation cables 6144, 6146, 6150, 6152 are coupled to the articulation control arrangement 6160 which comprises a ball joint assembly that is a part of the articulation transmission 6142. More specifically and with reference to FIG. 132, the ball joint assembly 6160 includes a ball-shaped member 6162 that is formed on a proximal portion of the proximal spine 6110. Movably supported on the ball-shaped member 6162 is an articulation control ring 6164. As can be further seen in FIG. 132, the proximal ends of the articulation cables 6144, 6146, 6150, 6152 are coupled to the articulation control ring 6164 by corresponding ball joint arrangements 6166. The articulation control ring 6164 is controlled by an articulation drive assembly 6170. As can be most particularly seen in FIG. 132, the proximal ends of the first articulation cables 6144, 6146 are attached to the articulation control ring 6164 at corresponding spaced first points 6149, 6151 that are located on plane 6159. Likewise, the proximal ends of the second articulation cables 6150, 6152 are attached to the articulation control ring 6164 at corresponding spaced second points 6153, 6155 that are also located along plane 6159. As the present Detailed Description proceeds, those of ordinary skill in the art will appreciate that such cable attachment configuration on the articulation control ring 6164 facilitates the desired range of articulation motions as the articulation control ring 6164 is manipulated by the articulation drive assembly 6170.

In various forms, the articulation drive assembly 6170 comprises a horizontal articulation assembly generally designated as 6171. In at least one form, the horizontal articulation assembly 6171 comprises a horizontal push cable 6172 that is attached to a horizontal gear arrangement 6180. The articulation drive assembly 6170 further comprises a vertically articulation assembly generally designated as 6173. In at least one form, the vertical articulation assembly 6173 comprises a vertical push cable 6174 that is attached to a

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vertical gear arrangement **6190**. As can be seen in FIGS. **131** and **132**, the horizontal push cable **6172** extends through a support plate **6167** that is attached to the proximal spine portion **6110**. The distal end of the horizontal push cable **6174** is attached to the articulation control ring **6164** by a corresponding ball/pivot joint **6168**. The vertical push cable **6174** extends through the support plate **6167** and the distal end thereof is attached to the articulation control ring **6164** by a corresponding ball/pivot joint **6169**.

The horizontal gear arrangement **6180** includes a horizontal driven gear **6182** that is pivotally mounted on a horizontal shaft **6181** that is attached to a proximal portion of the proximal spine portion **6110**. The proximal end of the horizontal push cable **6172** is pivotally attached to the horizontal driven gear **6182** such that, as the horizontal driven gear **6172** is rotated about horizontal pivot axis HA, the horizontal push cable **6172** applies a first pivot motion to the articulation control ring **6164**. Likewise, the vertical gear arrangement **6190** includes a vertical driven gear **6192** that is pivotally supported on a vertical shaft **6191** attached to the proximal portion of the proximal spine portion **6110** for pivotal travel about a vertical pivot axis VA. The proximal end of the vertical push cable **6174** is pivotally attached to the vertical driven gear **6192** such that as the vertical driven gear **6192** is rotated about vertical pivot axis VA, the vertical push cable **6174** applies a second pivot motion to the articulation control ring **6164**.

The horizontal driven gear **6182** and the vertical driven gear **6192** are driven by an articulation gear train **6300** that operably interfaces with an articulation shifter assembly **6320**. In at least one form, the articulation shifter assembly comprises an articulation drive gear **6322** that is coupled to a corresponding one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **6202**. See FIG. **26**. Thus, application of a rotary input motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding driven element **1304** will cause rotation of the articulation drive gear **6322** when the interface **1230** is coupled to the tool holder **1270**. An articulation driven gear **6324** is attached to a splined shifter shaft **6330** that is rotatably supported on the tool mounting plate **6202**. The articulation driven gear **6324** is in meshing engagement with the articulation drive gear **6322** as shown. Thus, rotation of the articulation drive gear **6322** will result in the rotation of the shaft **6330**. In various forms, a shifter driven gear assembly **6340** is movably supported on the splined portion **6332** of the shifter shaft **6330**.

In various embodiments, the shifter driven gear assembly **6340** includes a driven shifter gear **6342** that is attached to a shifter plate **6344**. The shifter plate **6344** operably interfaces with a shifter solenoid assembly **6350**. The shifter solenoid assembly **6350** is coupled to corresponding pins **6352** by conductors **6352**. See FIG. **131**. Pins **6352** are oriented to electrically communicate with slots **1258** (FIG. **25**) on the tool side **1244** of the adaptor **1240**. Such arrangement serves to electrically couple the shifter solenoid assembly **6350** to the robotic controller **1001**. Thus, activation of the shifter solenoid **6350** will shift the shifter driven gear assembly **6340** on the splined portion **6332** of the shifter shaft **6330** as represented by arrow "S" in FIGS. **131** and **132**. Various embodiments of the articulation gear train **6300** further include a horizontal gear assembly **6360** that includes a first horizontal drive gear **6362** that is mounted on a shaft **6361** that is rotatably attached to the tool mounting plate **6202**. The first horizontal drive gear **6362** is supported in meshing engagement with a second horizontal drive gear **6364**. As can be seen in

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FIG. **137**, the horizontal driven gear **6182** is in meshing engagement with the distal face portion **6365** of the second horizontal driven gear **6364**.

Various embodiments of the articulation gear train **6300** further include a vertical gear assembly **6370** that includes a first vertical drive gear **6372** that is mounted on a shaft **6371** that is rotatably supported on the tool mounting plate **6202**. The first vertical drive gear **6372** is supported in meshing engagement with a second vertical drive gear **6374** that is concentrically supported with the second horizontal drive gear **6364**. The second vertical drive gear **6374** is rotatably supported on the proximal spine portion **6110** for travel therearound. The second horizontal drive gear **6364** is rotatably supported on a portion of said second vertical drive gear **6374** for independent rotatable travel thereon. As can be seen in FIG. **132**, the vertical driven gear **6192** is in meshing engagement with the distal face portion **6375** of the second vertical driven gear **6374**.

In various forms, the first horizontal drive gear **6362** has a first diameter and the first vertical drive gear **6372** has a second diameter. As can be seen in FIGS. **131** and **132**, the shaft **6361** is not on a common axis with shaft **6371**. That is, the first horizontal driven gear **6362** and the first vertical driven gear **6372** do not rotate about a common axis. Thus, when the shifter gear **6342** is positioned in a center "locking" position such that the shifter gear **6342** is in meshing engagement with both the first horizontal driven gear **6362** and the first vertical drive gear **6372**, the components of the articulation system **6140** are locked in position. Thus, the shiftable shifter gear **6342** and the arrangement of first horizontal and vertical drive gears **6362**, **6372** as well as the articulation shifter assembly **6320** collectively may be referred to as an articulation locking system, generally designated as **6380**.

In use, the robotic controller **1001** of the robotic system **1000** may control the articulation system **6140** as follows. To articulate the end effector **6012** to the left about the first tool articulation axis TA1-TA1, the robotic controller **1001** activates the shifter solenoid assembly **6350** to bring the shifter gear **6342** into meshing engagement with the first horizontal drive gear **6362**. Thereafter, the controller **1001** causes a first rotary output motion to be applied to the articulation drive gear **6322** to drive the shifter gear in a first direction to ultimately drive the horizontal driven gear **6182** in another first direction. The horizontal driven gear **6182** is driven to pivot the articulation ring **6164** on the ball-shaped portion **6162** to thereby pull right upper cable **6144** and the right lower cable **6146** in the proximal direction "PD". To articulate the end effector **6012** to the right about the first tool articulation axis TA1-TA1, the robotic controller **1001** activates the shifter solenoid assembly **6350** to bring the shifter gear **6342** into meshing engagement with the first horizontal drive gear **6362**. Thereafter, the controller **1001** causes the first rotary output motion in an opposite direction to be applied to the articulation drive gear **6322** to drive the shifter gear **6342** in a second direction to ultimately drive the horizontal driven gear **6182** in another second direction. Such actions result in the articulation control ring **6164** moving in such a manner as to pull the left upper cable **6150** and the left lower cable **6152** in the proximal direction "PD". In various embodiments the gear ratios and frictional forces generated between the gears of the vertical gear assembly **6370** serve to prevent rotation of the vertical driven gear **6192** as the horizontal gear assembly **6360** is actuated.

To articulate the end effector **6012** in the upper direction about the second tool articulation axis TA2-TA2, the robotic controller **1001** activates the shifter solenoid assembly **6350** to bring the shifter gear **6342** into meshing engagement with

the first vertical drive gear **6372**. Thereafter, the controller **1001** causes the first rotary output motion to be applied to the articulation drive gear **6322** to drive the shifter gear **6342** in a first direction to ultimately drive the vertical driven gear **6192** in another first direction. The vertical driven gear **6192** is driven to pivot the articulation ring **6164** on the ball-shaped portion **6162** of the proximal spine portion **6110** to thereby pull right upper cable **6144** and the left upper cable **6150** in the proximal direction “PD”. To articulate the end effector **6012** in the downward direction about the second tool articulation axis TA2-TA2, the robotic controller **1001** activates the shifter solenoid assembly **6350** to bring the shifter gear **6342** into meshing engagement with the first vertical drive gear **6372**. Thereafter, the controller **1001** causes the first rotary output motion to be applied in an opposite direction to the articulation drive gear **6322** to drive the shifter gear **6342** in a second direction to ultimately drive the vertical driven gear **6192** in another second direction. Such actions thereby cause the articulation control ring **6164** to pull the right lower cable **6146** and the left lower cable **6152** in the proximal direction “PD”. In various embodiments, the gear ratios and frictional forces generated between the gears of the horizontal gear assembly **6360** serve to prevent rotation of the horizontal driven gear **6182** as the vertical gear assembly **6370** is actuated.

In various embodiments, a variety of sensors may communicate with the robotic controller **1001** to determine the articulated position of the end effector **6012**. Such sensors may interface with, for example, the articulation joint **6100** or be located within the tool mounting portion **6200**. For example, sensors may be employed to detect the position of the articulation control ring **6164** on the ball-shaped portion **6162** of the proximal spine portion **6110**. Such feedback from the sensors to the controller **1001** permits the controller **1001** to adjust the amount of rotation and the direction of the rotary output to the articulation drive gear **6322**. Further, as indicated above, when the shifter drive gear **6342** is centrally positioned in meshing engagement with the first horizontal drive gear **6362** and the first vertical drive gear **6372**, the end effector **6012** is locked in the articulated position. Thus, after the desired amount of articulation has been attained, the controller **1001** may activate the shifter solenoid assembly **6350** to bring the shifter gear **6342** into meshing engagement with the first horizontal drive gear **6362** and the first vertical drive gear **6372**. In alternative embodiments, the shifter solenoid assembly **6350** may be spring activated to the central locked position.

In use, it may be desirable to rotate the surgical end effector **6012** about the longitudinal tool axis LT-LT. In at least one embodiment, the transmission arrangement **6204** on the tool mounting portion includes a rotational transmission assembly **6400** that is configured to receive a corresponding rotary output motion from the tool drive assembly **1010** of the robotic system **1000** and convert that rotary output motion to a rotary control motion for rotating the elongated shaft assembly **6008** (and surgical end effector **6012**) about the longitudinal tool axis LT-LT. In various embodiments, for example, a proximal end portion **6041** of the proximal closure tube **6040** is rotatably supported on the tool mounting plate **6202** of the tool mounting portion **6200** by a forward support cradle **6205** and a closure sled **6510** that is also movably supported on the tool mounting plate **6202**. In at least one form, the rotational transmission assembly **6400** includes a tube gear segment **6402** that is formed on (or attached to) the proximal end **6041** of the proximal closure tube **6040** for operable engagement by a rotational gear assembly **6410** that is operably supported on the tool mounting plate **6202**. As can be

seen in FIG. **131**, the rotational gear assembly **6410**, in at least one embodiment, comprises a rotation drive gear **6412** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **6202** when the tool mounting portion **6200** is coupled to the tool drive assembly **1010**. See FIG. **26**. The rotational gear assembly **6410** further comprises a first rotary driven gear **6414** that is rotatably supported on the tool mounting plate **6202** in meshing engagement with the rotation drive gear **6412**. The first rotary driven gear **6414** is attached to a drive shaft **6416** that is rotatably supported on the tool mounting plate **6202**. A second rotary driven gear **6418** is attached to the drive shaft **6416** and is in meshing engagement with tube gear segment **6402** on the proximal closure tube **6040**. Application of a second rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corresponding driven element **1304** will thereby cause rotation of the rotation drive gear **6412**. Rotation of the rotation drive gear **6412** ultimately results in the rotation of the elongated shaft assembly **6008** (and the surgical end effector **6012**) about the longitudinal tool axis LT-LT. It will be appreciated that the application of a rotary output motion from the tool drive assembly **1010** in one direction will result in the rotation of the elongated shaft assembly **6008** and surgical end effector **6012** about the longitudinal tool axis LT-LT in a first direction and an application of the rotary output motion in an opposite direction will result in the rotation of the elongated shaft assembly **6008** and surgical end effector **6012** in a second direction that is opposite to the first direction.

In at least one embodiment, the closure of the anvil **2024** relative to the staple cartridge **2034** is accomplished by axially moving a closure portion of the elongated shaft assembly **2008** in the distal direction “DD” on the spine assembly **2049**. As indicated above, in various embodiments, the proximal end portion **6041** of the proximal closure tube **6040** is supported by the closure sled **6510** which comprises a portion of a closure transmission, generally depicted as **6512**. As can be seen in FIG. **131**, the proximal end portion **6041** of the proximal closure tube portion **6040** has a collar **6048** formed thereon. The closure sled **6510** is coupled to the collar **6048** by a yoke **6514** that engages an annular groove **6049** in the collar **6048**. Such arrangement serves to enable the collar **6048** to rotate about the longitudinal tool axis LT-LT while still being coupled to the closure transmission **6512**. In various embodiments, the closure sled **6510** has an upstanding portion **6516** that has a closure rack gear **6518** formed thereon. The closure rack gear **6518** is configured for driving engagement with a closure gear assembly **6520**. See FIG. **131**.

In various forms, the closure gear assembly **6520** includes a closure spur gear **6522** that is coupled to a corresponding second one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **6202**. See FIG. **26**. Thus, application of a third rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corresponding second driven element **1304** will cause rotation of the closure spur gear **6522** when the tool mounting portion **6202** is coupled to the tool drive assembly **1010**. The closure gear assembly **6520** further includes a closure reduction gear set **6524** that is supported in meshing engagement with the closure spur gear **6522** and the closure rack gear **2106**. Thus, application of a third rotary output motion from the tool drive assembly **1010** of the robotic system **1000** to the corresponding second driven element **1304** will cause rotation of the closure spur gear **6522** and the closure transmission **6512** and ultimately drive the closure sled **6510** and the proximal closure tube **6040** axially on the proximal spine portion **6110**.

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The axial direction in which the proximal closure tube **6040** moves ultimately depends upon the direction in which the third driven element **1304** is rotated. For example, in response to one rotary output motion received from the tool drive assembly **1010** of the robotic system **1000**, the closure sled **6510** will be driven in the distal direction "DD" and ultimately drive the proximal closure tube **6040** in the distal direction "DD". As the proximal closure tube **6040** is driven distally, the distal closure tube **6042** is also driven distally by virtue of its connection with the proximal closure tube **6040**. As the distal closure tube **6042** is driven distally, the end of the closure tube **6042** will engage a portion of the anvil **6024** and cause the anvil **6024** to pivot to a closed position. Upon application of an "opening" output motion from the tool drive assembly **1010** of the robotic system **1000**, the closure sled **6510** and the proximal closure tube **6040** will be driven in the proximal direction "PD" on the proximal spine portion **6110**. As the proximal closure tube **6040** is driven in the proximal direction "PD", the distal closure tube **6042** will also be driven in the proximal direction "PD". As the distal closure tube **6042** is driven in the proximal direction "PD", the opening **6045** therein interacts with the tab **6027** on the anvil **6024** to facilitate the opening thereof. In various embodiments, a spring (not shown) may be employed to bias the anvil **6024** to the open position when the distal closure tube **6042** has been moved to its starting position. In various embodiments, the various gears of the closure gear assembly **6520** are sized to generate the necessary closure forces needed to satisfactorily close the anvil **6024** onto the tissue to be cut and stapled by the surgical end effector **6012**. For example, the gears of the closure transmission **6520** may be sized to generate approximately 70-120 pounds of closure forces.

In various embodiments, the cutting instrument is driven through the surgical end effector **6012** by a knife bar **6530**. See FIG. **131**. In at least one form, the knife bar **6530** is fabricated with a joint arrangement (not shown) and/or is fabricated from material that can accommodate the articulation of the surgical end effector **6012** about the first and second tool articulation axes while remaining sufficiently rigid so as to push the cutting instrument through tissue clamped in the surgical end effector **6012**. The knife bar **6530** extends through a hollow passage **6532** in the proximal spine portion **6110**.

In various embodiments, a proximal end **6534** of the knife bar **6530** is rotatably affixed to a knife rack gear **6540** such that the knife bar **6530** is free to rotate relative to the knife rack gear **6540**. The distal end of the knife bar **6530** is attached to the cutting instrument in the various manners described above. As can be seen in FIG. **131**, the knife rack gear **6540** is slidably supported within a rack housing **6542** that is attached to the tool mounting plate **6202** such that the knife rack gear **6540** is retained in meshing engagement with a knife drive transmission portion **6550** of the transmission arrangement **6204**. In various embodiments, the knife drive transmission portion **6550** comprises a knife gear assembly **6560**. More specifically and with reference to FIG. **131**, in at least one embodiment, the knife gear assembly **6560** includes a knife spur gear **6562** that is coupled to a corresponding fourth one of the driven discs or elements **1304** on the adapter side **1307** of the tool mounting plate **6202**. See FIG. **26**. Thus, application of another rotary output motion from the robotic system **1000** through the tool drive assembly **1010** to the corresponding fourth driven element **1304** will cause rotation of the knife spur gear **6562**. The knife gear assembly **6560** further includes a knife gear reduction set **6564** that includes a first knife driven gear **6566** and a second knife drive gear **6568**. The knife gear reduction set **6564** is rotatably mounted

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to the tool mounting plate **6202** such that the first knife driven gear **6566** is in meshing engagement with the knife spur gear **6562**. Likewise, the second knife drive gear **6568** is in meshing engagement with a third knife drive gear assembly **6570**. As shown in FIG. **131**, the second knife driven gear **6568** is in meshing engagement with a fourth knife driven gear **6572** of the third knife drive gear assembly **6570**. The fourth knife driven gear **6572** is in meshing engagement with a fifth knife driven gear assembly **6574** that is in meshing engagement with the knife rack gear **6540**. In various embodiments, the gears of the knife gear assembly **6560** are sized to generate the forces needed to drive the cutting instrument through the tissue clamped in the surgical end effector **6012** and actuate the staples therein. For example, the gears of the knife gear assembly **6560** may be sized to generate approximately 40 to 100 pounds of driving force. It will be appreciated that the application of a rotary output motion from the tool drive assembly **1010** in one direction will result in the axial movement of the cutting instrument in a distal direction and application of the rotary output motion in an opposite direction will result in the axial travel of the cutting instrument in a proximal direction.

As can be appreciated from the foregoing description, the surgical tool **6000** represents a vast improvement over prior robotic tool arrangements. The unique and novel transmission arrangement employed by the surgical tool **6000** enables the tool to be operably coupled to a tool holder portion **1010** of a robotic system that only has four rotary output bodies, yet obtain the rotary output motions therefrom to: (i) articulate the end effector about two different articulation axes that are substantially transverse to each other as well as the longitudinal tool axis; (ii) rotate the end effector **6012** about the longitudinal tool axis; (iii) close the anvil **6024** relative to the surgical staple cartridge **6034** to varying degrees to enable the end effector **6012** to be used to manipulate tissue and then clamp it into position for cutting and stapling; and (iv) firing the cutting instrument to cut through the tissue clamped within the end effector **6012**. The unique and novel shifter arrangements of various embodiments of the present invention described above enable two different articulation actions to be powered from a single rotatable body portion of the robotic system.

The various embodiments of the present invention have been described above in connection with cutting-type surgical instruments. It should be noted, however, that in other embodiments, the inventive surgical instrument disclosed herein need not be a cutting-type surgical instrument, but rather could be used in any type of surgical instrument including remote sensor transponders. For example, it could be a non-cutting endoscopic instrument, a grasper, a stapler, a clip applier, an access device, a drug/gene therapy delivery device, an energy device using ultrasound, RF, laser, etc. In addition, the present invention may be in laparoscopic instruments, for example. The present invention also has application in conventional endoscopic and open surgical instrumentation as well as robotic-assisted surgery.

FIG. **133** depicts use of various aspects of certain embodiments of the present invention in connection with a surgical tool **7000** that has an ultrasonically powered end effector **7012**. The end effector **7012** is operably attached to a tool mounting portion **7100** by an elongated shaft assembly **7008**. The tool mounting portion **7100** may be substantially similar to the various tool mounting portions described hereinabove. In one embodiment, the end effector **7012** includes an ultrasonically powered jaw portion **7014** that is powered by alternating current or direct current in a known manner. Such ultrasonically-powered devices are disclosed, for example, in

U.S. Pat. No. 6,783,524, entitled "Robotic Surgical Tool With Ultrasound Cauterizing and Cutting Instrument", the entire disclosure of which is herein incorporated by reference. In the illustrated embodiment, a separate power cord **7020** is shown. It will be understood, however, that the power may be supplied thereto from the robotic controller **1001** through the tool mounting portion **7100**. The surgical end effector **7012** further includes a movable jaw **7016** that may be used to clamp tissue onto the ultrasonic jaw portion **7014**. The movable jaw portion **7016** may be selectively actuated by the robotic controller **1001** through the tool mounting portion **7100** in any one of the various manners herein described.

FIG. **134** illustrates use of various aspects of certain embodiments of the present invention in connection with a surgical tool **8000** that has an end effector **8012** that comprises a linear stapling device. The end effector **8012** is operably attached to a tool mounting portion **8100** by an elongated shaft assembly **3700** of the type and construction describe above. However, the end effector **8012** may be attached to the tool mounting portion **8100** by a variety of other elongated shaft assemblies described herein. In one embodiment, the tool mounting portion **8100** may be substantially similar to tool mounting portion **3750**. However, various other tool mounting portions and their respective transmission arrangements describe in detail herein may also be employed. Such linear stapling head portions are also disclosed, for example, in U.S. Pat. No. 7,673,781, entitled "Surgical Stapling Device With Staple Driver That Supports Multiple Wire Diameter Staples", the entire disclosure of which is herein incorporated by reference.

Various sensor embodiments described in U.S. Patent Publication No. 2011/0062212 A1 to Shelton, I V et al., the disclosure of which is herein incorporated by reference in its entirety, may be employed with many of the surgical tool embodiments disclosed herein. As was indicated above, the master controller **1001** generally includes master controllers (generally represented by **1003**) which are grasped by the surgeon and manipulated in space while the surgeon views the procedure via a stereo display **1002**. See FIG. **17**. The master controllers **1001** are manual input devices which preferably move with multiple degrees of freedom, and which often further have an actuatable handle for actuating the surgical tools. Some of the surgical tool embodiments disclosed herein employ a motor or motors in their tool drive portion to supply various control motions to the tool's end effector. Such embodiments may also obtain additional control motion(s) from the motor arrangement employed in the robotic system components. Other embodiments disclosed herein obtain all of the control motions from motor arrangements within the robotic system.

Such motor powered arrangements may employ various sensor arrangements that are disclosed in the published US patent application cited above to provide the surgeon with a variety of forms of feedback without departing from the spirit and scope of the present invention. For example, those master controller arrangements **1003** that employ a manually actuatable firing trigger can employ run motor sensor(s) to provide the surgeon with feedback relating to the amount of force applied to or being experienced by the cutting member. The run motor sensor(s) may be configured for communication with the firing trigger portion to detect when the firing trigger portion has been actuated to commence the cutting/stapling operation by the end effector. The run motor sensor may be a proportional sensor such as, for example, a rheostat or variable resistor. When the firing trigger is drawn in, the sensor detects the movement, and sends an electrical signal indicative of the voltage (or power) to be supplied to the correspond-

ing motor. When the sensor is a variable resistor or the like, the rotation of the motor may be generally proportional to the amount of movement of the firing trigger. That is, if the operator only draws or closes the firing trigger in a small amount, the rotation of the motor is relatively low. When the firing trigger is fully drawn in (or in the fully closed position), the rotation of the motor is at its maximum. In other words, the harder the surgeon pulls on the firing trigger, the more voltage is applied to the motor causing greater rates of rotation. Other arrangements may provide the surgeon with a feed back meter **1005** that may be viewed through the display **1002** and provide the surgeon with a visual indication of the amount of force being applied to the cutting instrument or dynamic clamping member. Other sensor arrangements may be employed to provide the master controller **1001** with an indication as to whether a staple cartridge has been loaded into the end effector, whether the anvil has been moved to a closed position prior to firing, etc.

In alternative embodiments, a motor-controlled interface may be employed in connection with the controller **1001** that limit the maximum trigger pull based on the amount of loading (e.g., clamping force, cutting force, etc.) experienced by the surgical end effector. For example, the harder it is to drive the cutting instrument through the tissue clamped within the end effector, the harder it would be to pull/actuate the activation trigger. In still other embodiments, the trigger on the controller **1001** is arranged such that the trigger pull location is proportionate to the end effector-location/condition. For example, the trigger is only fully depressed when the end effector is fully fired.

The devices disclosed herein can be designed to be disposed of after a single use, or they can be designed to be used multiple times. In either case, however, the device can be reconditioned for reuse after at least one use. Reconditioning can include any combination of the steps of disassembly of the device, followed by cleaning or replacement of particular pieces, and subsequent reassembly. In particular, the device can be disassembled, and any number of the particular pieces or parts of the device can be selectively replaced or removed in any combination. Upon cleaning and/or replacement of particular parts, the device can be reassembled for subsequent use either at a reconditioning facility, or by a surgical team immediately prior to a surgical procedure. Those skilled in the art will appreciate that reconditioning of a device can utilize a variety of techniques for disassembly, cleaning/replacement, and reassembly. Use of such techniques, and the resulting reconditioned device, are all within the scope of the present application.

Although the present invention has been described herein in connection with certain disclosed embodiments, many modifications and variations to those embodiments may be implemented. For example, different types of end effectors may be employed. Also, where materials are disclosed for certain components, other materials may be used. The foregoing description and following claims are intended to cover all such modification and variations.

Any patent, publication, or other disclosure material, in whole or in part, that is said to be incorporated by reference herein is incorporated herein only to the extent that the incorporated materials does not conflict with existing definitions, statements, or other disclosure material set forth in this disclosure. As such, and to the extent necessary, the disclosure as explicitly set forth herein supersedes any conflicting material incorporated herein by reference. Any material, or portion thereof, that is said to be incorporated by reference herein, but which conflicts with existing definitions, statements, or other disclosure material set forth herein will only be incorporated

to the extent that no conflict arises between that incorporated material and the existing disclosure material.

What is claimed is:

1. A surgical tool for use with a robotic system that has a tool drive assembly that is operatively coupled to a control unit of the robotic system that is operable by inputs from an operator and is configured to provide at least one rotary output motion to at least one rotatable body portion supported on the tool drive assembly, said surgical tool comprising:

a surgical end effector configured to perform a surgical procedure in response to control motions applied thereto from the robotic system;

an elongated shaft assembly operably coupled to said surgical end effector and defining a longitudinal tool axis, said elongated shaft assembly having an articulation joint operably supported therein configured to enable said surgical end effector to be selectively articulated about a first tool articulation axis relative to the longitudinal tool axis and about a second tool articulation axis relative to said longitudinal tool axis; and

a tool mounting portion operably coupled to said elongated shaft assembly and configured to operably interface with the tool drive assembly of the robotic system, said tool mounting portion operably supporting a transmission arrangement comprising an articulation transmission configured to apply articulation control motions to said articulation joint in response to said at least one rotary output motion applied thereto from the tool drive assembly, said articulation transmission comprising:

an articulation control member movably supported within said tool mounting portion and being selectively movable in a plurality of directions in response to actuation motions applied thereto from an articulation drive assembly operably interfacing with the tool drive assembly of the robotic system, said articulation control member comprising an articulation control ring movably supported on a ball-shaped member supported within said tool mounting portion such that said articulation control ring is capable of rotary movement thereon in said plurality of directions; and

a plurality of articulation elements coupled to said surgical end effector and being operably attached to said articulation control member such that movement of said articulation control member is transferred to said surgical end effector by at least two of said articulation elements.

2. The surgical tool of claim 1 wherein:

said first tool articulation axis is substantially transverse to said longitudinal tool axis; and

said second tool articulation axis is substantially transverse to said first tool articulation axis and said longitudinal tool axis.

3. The surgical tool of claim 1 wherein said plurality of articulation elements comprises:

a first pair of first articulation cables coupled to said articulation control ring, each said first articulation cable being movably supported by said elongated shaft assembly on a first side of said longitudinal tool axis and being coupled to said surgical end effector; and

a second pair of second articulation cables coupled to said articulation control ring, each said second articulation cables being movably supported by said elongated shaft assembly on a second side of said longitudinal tool axis and being coupled to said surgical end effector.

4. The surgical tool of claim 3 wherein:

said first pair of first articulation cables are attached to said articulation control ring at separate first points that are on a common plane; and

said second pair of second articulation cables are attached to said articulation control ring at separate second points that are on said common plane and spaced from said first points.

5. The surgical tool of claim 1 wherein said articulation transmission is configured to operably interface with the at least one single rotatable body portion supported on the tool drive assembly of the robotic system.

6. The surgical tool of claim 1 wherein said surgical end effector comprises:

a surgical staple cartridge; and

an anvil selectively movable relative to said surgical staple cartridge between an open position and a closed position.

7. The surgical tool of claim 6 wherein said surgical end effector further comprises a cutting instrument that is axially movable within said surgical staple cartridge between a starting position and an ending position in response to a firing motion applied thereto by said transmission arrangement.

8. A surgical tool for use with a robotic system that has a tool drive assembly that is operatively coupled to a controller of the robotic system that is operable by inputs from an operator and is configured to provide a plurality of rotary output motions to a plurality of corresponding rotatable body portions supported on the tool drive assembly, said surgical tool comprising:

an end effector, comprising:

an elongated channel;

a surgical staple cartridge operably supported within said elongated channel;

a cutting instrument axially movable within said surgical staple cartridge between a starting position and an ending position; and

an anvil movably supported relative to said elongated channel and being selectively movable between an open position relative to said surgical staple cartridge and a closed position relative to said surgical staple cartridge and wherein said surgical tool further comprises:

an elongated shaft assembly comprising:

a spine assembly defining a longitudinal tool axis and comprising:

a proximal spine portion; and

a distal spine portion pivotally coupled to a distal end of said proximal spine portion for selective pivotal travel relative thereto about a first tool articulation axis that is substantially transverse to said longitudinal tool axis and wherein said distal spine portion is pivotally coupled to said elongated channel to facilitate pivotal travel of said elongated channel relative to said distal spine portion about a second tool articulation axis that is substantially transverse to said longitudinal tool axis and said first tool articulation axis and wherein said elongated shaft assembly further comprises:

a closure tube assembly movably supported on said spine assembly, said closure tube assembly comprising:

a proximal closure tube having a proximal end portion and a distal end;

an intermediate closure tube joint pivotally coupled to said distal end of said proximal closure tube for pivotal travel relative thereto; and

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a distal closure tube pivotally coupled to said intermediate closure tube joint for pivotal travel relative thereto, said distal closure tube configured for operable interaction with said anvil and wherein said surgical tool further comprises:

a tool mounting portion coupled to a proximal end portion of said proximal spine portion and configured to operably interface with the tool drive assembly of the robotic system when coupled thereto, said tool mounting portion comprising:

an articulation transmission operably interfacing with a single one of the rotatable body portions on the tool drive assembly of the robotic system, said articulation transmission further communicating with said elongated channel such that when said articulation transmission is in a first position, a first rotary output motion applied thereto by said single rotatable body portion will cause said surgical end effector to pivot about said first tool articulation axis and when said articulation transmission is in a second position, said first rotary output motion applied thereto causes said surgical end effector to pivot about said second tool articulation axis;

a closure transmission assembly operably interfacing with a second one of the rotatable body portions on the tool drive assembly of the robotic system for receiving a second rotary output motion therefrom, said closure transmission in operable engagement with said proximal closure tube such that upon application of said second rotary output motion in a first direction to said closure transmission assembly, said closure tube assembly is driven distally on said spine assembly into closing engagement with said anvil to move said anvil from said open position to said closed position and upon application of said second rotary output motion in a second direction to said closure transmission assembly, said closure tube assembly is driven proximally on said spine assembly to enable said anvil to move to said open position;

a rotational transmission assembly operably interfacing with a third one of the rotatable body portions on the tool drive assembly of the robotic system for receiving a third rotary output motion therefrom, said rotational transmission in operable engagement with said proximal closure tube such that upon application of said third rotary output motion in a first direction to said rotational transmission by said third rotatable body portion, said rotational transmission assembly rotates said elongated shaft assembly and said surgical end effector in a first rotary direction about said longitudinal tool axis and upon application of said third rotary output motion in a second direction to said rotational transmission assembly, said rotational transmission assembly rotates said elongated shaft assembly and said surgical end effector about said longitudinal tool axis in a second rotary direction; and

a cutting instrument drive assembly operably interfacing with a fourth one of the rotatable body portions on the tool drive assembly of the robotic system for receiving a fourth rotary output motion therefrom such that upon application of said fourth rotary output motion in a first direction to said cutting instrument drive assembly by said fourth rotatable body portion, said cutting instrument drive assembly causes said cutting instrument to move from said starting position to said ending position and upon application of said fourth rotary output motion in a second direction to said

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cutting instrument drive assembly by said fourth rotatable body portion, said cutting instrument drive assembly causes said cutting instrument to be retracted from said ending position to said starting position.

9. A surgical tool for use with a robotic system that has a tool drive assembly that is operatively coupled to a control unit of the robotic system that is operable by inputs from an operator and is configured to provide at least one rotary output motion to at least one rotatable body portion supported on the tool drive assembly, said surgical tool comprising:

a surgical end effector configured to perform a surgical procedure in response to control motions applied thereto from the robotic system;

an elongated shaft assembly operably coupled to said surgical end effector and defining a longitudinal tool axis, said elongated shaft having an articulation joint operably supported therein configured to enable said surgical end effector to be selectively articulated about a first tool articulation axis relative to the longitudinal tool axis and about a second tool articulation axis relative to said longitudinal tool axis; and

a tool mounting portion operably coupled to said elongated shaft and configured to operably interface with the tool drive assembly of the robotic system, said tool mounting portion operably supporting a transmission arrangement comprising an articulation transmission configured to apply articulation control motions to said articulation joint in response to said at least one rotary output motion applied thereto from the tool drive assembly, said articulation transmission comprising:

an articulation control member movably supported within said tool mounting portion and being selectively movable in a plurality of directions in response to actuation motions applied thereto from an articulation drive assembly operably interfacing with the tool drive assembly of the robotic system;

a plurality of articulation elements coupled to said surgical end effector and being operably attached to said articulation control member such that movement of said articulation control member is transferred to said surgical end effector by at least two of said articulation elements;

a horizontal articulation assembly operably interfacing with said articulation control member;

a vertical articulation assembly operably interfacing with said articulation control member; and

an articulation shifter assembly communicating with the control unit of the robotic system and operably interfacing with a single one of the rotatable body portions supported on the tool drive assembly of the robotic system for receiving a rotary output motion therefrom, said articulation shifter assembly configured to shift between first and second positions in response to control inputs from the control unit such that when said articulation shifter assembly is in said first position, said rotary output motion is applied to said horizontal articulation assembly and when said shifter assembly is in said second position, said rotary output motion is applied to said vertical articulation assembly.

10. The surgical tool of claim 9 wherein said articulation shifter assembly comprises:

an articulation drive gear operably interfacing with said single rotatable body portion for receiving said rotary output motion therefrom;

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a shifter shaft in meshing engagement with said articulation drive gear; and
 a shifter driven gear mounted on said shifter shaft such that rotation of said shifter shaft rotates said shifter driven gear and wherein said shifter driven gear is selectively movable on said shifter shaft between said first position wherein said shifter driven gear is in driving engagement with said horizontal articulation assembly and said second position wherein said shifter driven gear is in driving engagement with said vertical articulation assembly in response to said control inputs.

11. The surgical tool of claim **10** wherein said shifter driven gear is selectively movable on said shifter shaft to an intermediate locked position wherein said shifter driven gear is in meshing engagement with said horizontal articulation assembly and said vertical articulation assembly to thereby prevent articulation of said surgical end effector.

12. The surgical tool of claim **11** wherein said horizontal articulation assembly comprises:

- a horizontal push member coupled to said articulation control member;
- a horizontal driven gear operably coupled to said horizontal push member; and
- a horizontal gear arrangement in meshing engagement with said horizontal driven gear and said shifter driven gear when said shifter driven gear is in said first or said intermediate locked position and wherein said vertical articulation assembly comprises:
- a vertical push member coupled to said articulation control member;
- a vertical driven gear operably coupled to said vertical push member; and
- a vertical gear arrangement in meshing engagement with said vertical driven gear and said shifter driven gear when said shifter driven gear is in said second or said intermediate locked position.

13. The surgical tool of claim **11** wherein said shifter driven gear is axially movable on said shifter shaft by a shifter solenoid communicating with the control unit.

14. The surgical tool of claim **9** wherein said surgical end effector comprises:

- a surgical staple cartridge; and
- an anvil selectively movable relative to said surgical staple cartridge between an open position and a closed position.

15. The surgical tool of claim **14** wherein said surgical end effector further comprises a cutting instrument that is axially movable within said surgical staple cartridge between a starting position and an ending position in response to a firing motion applied thereto by said transmission arrangement.

16. The surgical tool of claim **14** wherein said surgical staple cartridge is supported in an elongated channel of said surgical end effector and wherein said elongated shaft assembly comprises:

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a spine assembly comprising:

- a proximal spine portion having a proximal end portion operably supported on said tool mounting portion and a distal end; and

- a distal spine portion pivotally coupled to said distal end of said proximal spine portion for selective pivotal travel relative thereto about said first tool articulation axis and wherein said distal spine portion is pivotally coupled to said elongated channel to facilitate pivotal travel of said elongated channel relative to said distal spine portion about said second tool articulation axis and wherein said elongated shaft assembly further comprises:

- a closure tube assembly movably supported on said spine assembly, said closure tube assembly comprising:

- a proximal closure tube having a proximal end portion configured for operable interaction with said transmission arrangement and a distal end;

- an intermediate closure tube joint pivotally coupled to said distal end of said proximal closure tube for pivotal travel relative thereto; and

- a distal closure tube pivotally coupled to said intermediate closure tube joint for pivotal travel relative thereto, said distal closure tube configured for operable interaction with said anvil.

17. The surgical tool of claim **16** wherein said transmission arrangement comprises a closure transmission assembly supported on said tool mounting portion in operable engagement with the tool drive assembly of the robotic system for receiving a rotary output motion therefrom, said closure transmission in operable engagement with said proximal closure tube such that upon application of said rotary output motion in a first direction to said closure transmission assembly, said closure tube assembly is driven distally on said spine assembly into closing engagement with said anvil to move said anvil from said open position to said closed position and upon application of said rotary output motion in a second direction to said closure transmission assembly, said closure tube assembly is driven proximally on said spine assembly to enable said anvil to move to said open position.

18. The surgical tool of claim **9** wherein said elongated shaft assembly has a proximal end portion rotatably supported on said tool mounting portion and wherein said transmission arrangement comprises a rotational transmission assembly operably coupled to one of the at least one rotatable body portions supported on the tool drive assembly such that upon application of a rotary output motion in a first direction to said rotational transmission by said at least one rotatable body portion, said rotational transmission assembly rotates said elongated shaft assembly and said surgical end effector in a first rotary direction about said longitudinal tool axis and upon application of said rotary output motion in a second direction to said rotational transmission assembly, said rotational transmission assembly rotates said elongated shaft assembly and said surgical end effector about said longitudinal tool axis in a second rotary direction.

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